GRUNLEY



To: Mary E. S	Switzer Building	Date:	October 12, 2015
330 C St	NW		
Washingt	ton, D.C.	Contract No.:	GS11P14MKC0010
-			
		Project Name:	Switzer HHSC
Attn: Chris Hud	dson-Boyd, GSA Project Manager		
		Project No.:	G14.312
		Sent Via:	Email/Jobsite - Hand Delivery

The following Certified Payroll is being transmitted for the above referenced project:

NO. OF COPIES	DESCRIPTION						
1 Original	CERTIFIED PAYROLLS						
1 Copy	ADJ Sheet Metal (WE Bowers), W/E 09/27/15 NW, 09/20/15						
	Advanced Power Control (WE Bowers), W/E 09/27/15, 09/20/15 NW, 09/13/15 NW						
	Capital Demolition, W/E 09/27/15 NW, 09/20/15 NW						
	Columbia Woodworking, W/E 09/27/15 NW, 09/20/15 NW						
	Commercial Energy Systems (APC)(WE Bowers), W/E 09/06/15 NW, 08/30/15						
	Creative Woodworking (Columbia Woodworking), W/E 09/13/15						
Elam Maintenance Services, W/E 06/21/15 (Final), 06/14/15, 06/07/15 NW, 05/31/15 05/24/15, 05/17/15, 05/10/15, 05/03/15, 04/26/15 NW, 04/19/15 NW, 04/12/15							
	Fain-Padgett (WE Bowers) W/E 09/25/15 NW, 09/18/15 NW						
	G & M Services (Singleton), W/E 09/20/15 NW						
	Grunley Construction, W/E 10/04/15, 09/27/15, 09/20/15						
	Singleton Electric, W/E 09/27/15, 09/20/15						
	Stanley Access, W/E 09/12/15 NW, 09/05/15 NW						
	W.E. Bowers, W/E 09/27/15, 09/20/15						
	Wycliffe dba Powercomm, W/E 09/26/15 NW, 09/19/15 NW						

Should you require additional information, please do not hesitate to contact us.

GRUNLEY CONSTRUCTION CO., INC. Certified Payroll Department

cc: File J. Hernandez

DATE: 09/29/15			
La secon emperator		(4) That:	
I, Sheri HIII (Name of signatory party)	, Payroll Manager (Title)	(a) WHERE FRINGE BENEFIT FUNDS, OR PROGRAMS	TS ARE PAID TO APPROVED PLANS,
ADJ Sheet Metal, Inc. on the MA that during the payroll period cor September 2015, and ending all persons employed on said pro weekly wages earned, that no re either directly or indirectly. On be	mmencing on the 21 st day of the 27th day of September 2015 bject have been paid the full bates have been or will be made	In addition to the basic hou to each laborer or mechan referenced payroll, paymer as listed in the contract ha made to appropriate prograsuch employees, except as below.	nic listed in the above nts of fringe benefits nive been or will be rams for the benefit of s noted in Section 4(c)
ADJ Sheet Metal, Inc. from the full weekly wages earne	d	(b) WHERE FRINGE BENEFITS A	ARE PAID IN CASH
by any person and that no deduc directly or indirectly from the full other than permissible deduction Part 3 (29 CFR Subtitle A), issue under the Copeland Act, as ame	tions have been made either wages earned by any person, s as defined in Regulations,	Each laborer or mechanic referenced payroll has bee on the payroll, an amount of the applicable basic hou the amount of the required listed in the contract, excessection 4 (c) below.	en paid, as indicated not less than the sum urly wage rate plus I fringe benefits as
		(c) EXCEPTIONS	
		EXCEPTION (CRAFT)	EXPLANATION
			-
(2) That any payrolls otherwis to be submitted for the above pethat the wage rates for laborers are not less than the applicable wage determination incorporated classifications set forth therein for conform with the work he performance.	or mechanics contained therein wage rates contained in any d into the contract; that the or each laborer or mechanic	REMARKS: Sub of W.E. Bowers	
registered in a bona fide appren	oyed in the above period are duly ticeship program registered with		
a State apprenticeship agency re	ecognized by the Bureau of		

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

Sheri HIII

Payroll Manager

Signature: _



THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.

4510 Graphics Drive White Plains, MD 20695 ADJ Sheet Metal, Inc. 01-0581604 Payroll Certification Report 14286-MARY SWITZER

Contract: 15008

09/21/15 To 09/27/15 <--DEDUCTIONS--> **Emp No** Name Exmp Job Pay FIT Minority Address <-----> HOURS WORKED -----> Tot Pay **FICA** Gender Union SS No EARN MON TUE WED THU FRI SAT SUN WEEK PAY JOB Nontax Frg ST TAX Misc. Check # CODE 09/21 09/22 09/23 09/24 09/25 09/26 09/27 TOTAL RATE WAGES **Trade Desc** Tax Frg LOC TAX **Total** Tot Net **No Work Performed** ------DEDUCTIONS-----> Job Job Pay NonTax Fringe FIT State Union Hours Tot Gross Taxable Fringe **FICA** Local Miscellaneous Tot Deductions Tot Net

WEEK NUMBER: 41

DATE:	09/22/15
DAIL.	03122113

(Name of signatory party)

I, Sheri HIII

, Payroll Manager (Title)

do hereby state:

(1) That I pay or supervise payment of the persons employed by ADJ Sheet Metal, Inc. on the MARY SWITZER;

that during the payroll period commencing on the 14th day of

September 2015, and ending the 20th day of September 2015 all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly. On behalf of said ADJ Sheet Metal, Inc.

from the full weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967, 76 Stat. 357, 40 U.S.C. 3145), and described below:

or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States

Department of Labor.

- (4) That:
 - (a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS
 - X In addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in Section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4 (c) below.

	(C) EXCEPTIONS	
	EXCEPTION (CRAFT)	EXPLANATION
FICA, Medicare, Federal/State/Local Withholding Taxes		
Apprentice Organizing, Dues Check Off, Organizing Assessment		
Scholarship Fund, SMART Assessment, Vacation / PAL per hour	-	
(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein	REMARKS:	
are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic	Sub of W.E. Bowers	
conform with the work he performed.		
(2) That any approximation and the state of		
(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with		
a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor.		

(-) EVOEDTIONO

Sheri HIII Payroll Manager

Signature: __(b) (6)

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.

4510 Graphics Drive White Plains, MD 20695

ADJ Sheet Metal, Inc. 01-0581604 Payroll Certification Report 14286-MARY SWITZER Contract: 15008

						09/1	4/15 T	09/20)/15					<deduc< th=""><th>TIONS></th><th>Emp No</th></deduc<>	TIONS>	Emp No
Name	Exmp												Job Pay	FIT		Minority
Address		<		НО	URS \	NORK	(ED		>				Tot Pav	FICA	Union	Gender
SS No	EARN						SAT	SUN	WEE		PAY	JOB	Nontax Frg		Misc.	Check #
Trade Desc	CODE	09/14	09/15	09/16	09/17	09/18	09/19	09/20	TOTA	L I	RATE	WAGES	Tax Frg	LOC TAX	Total	Tot Net
Niland, James M	1REG			8.00					8.00	41	.290	330.32	330.32	193.65		VILANDJ
	TOT								8.00				1,665.35	126.35	134.80	WHT
(b) (6)													137.52	73.70		Male
(b) (6)														43.44	571.94	150920117
Sheet Metal Journeyman																1,093.41

			<[DEDUCTIONS	>		
Job Hours	Job Pay Tot Gross	NonTax Fringe Taxable Fringe	FIT FICA	State Local	Union Miscellaneous	Tot Deductions	Tot Net
8.00	330.32 1,665.35	137.52	193.65 126.35	73.70 43.44	134.80	571.94	1,093.41

WEEK NUMBER: 40

Tue Sep 29, 2015 11:12:03am	UserId: lsimpson	ď	đ	Advanced Power Control Inc.	Control Inc.				Page:	5 RPRCRPR
Certified Payrol	Payroll Report	JOB #:	644160 Mary Switze: 00054698	itzer 098	Building HHSC		Vroll We 09/2	Payroll Week Ending 09/27/2015	Рау	Payroll No.
James L. Barry 628 Cherrytown Road Westminster MD 21158	sacNo.	Wages 1,839.68	Reimb	FICA MC 23.75	FICA SS 101.57	Federal 117.40 Union Ded	State C 86.81 Other Ded 348,76	Other/Local Total Ded/Tax 678.29	Net Pay 1,161.39 K	y Check# 9 74303
Classification Pr Journeyman-Electrici J	Pay Type Journeyman	Mon Tue	Wed 09-23	Thu Fri	sat Sun 09-26 09-27 Total	rotal 5.00 5.00	Δι	10	000	Fringes
Tarl C Escudero 329 Congressional Co Glen Burnie MD 21061 Soc	urt SecNo. 6)	Wages 1,347.53	Reimb	FICA MC 17.28	FICA SS 73.88	Federal 91.49 Union Ded	State C 69.85 Other Ded 286.17	Other/Local Total Ded/Tax	Net Pay 808.86	r check#6 74310
Classification Pr Journeyman-Electrici J	Pay Type Journeyman	Mon Tue 09-21 09-22 8.00	Wed 09-23	Thu Fri	Sat Sun 09-26 09-27 rotal	Total 8.00 8.00	Pay Rate 49.0000	Ω.	000	Fringes

	ial: (a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS — in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in section 4(c) below.	(4) That: (a) WHERE FRINGE BENEFITS ARE PAID TO AF — in addition to the basic hourly wage rathe above referenced payroll, payme have been or will be made to approprise except as noted in section 4(c) below.
	(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship ram registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and ing, United States Department of Labor, or if no such recognized agency exists in a State, are registered the Bureau of Apprenticeship and Training, United States Department of Labor.	(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.
	(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.	(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classificat set forth therein for each laborer or mechanic conform with the work he performed.
70		
	ctions have been made either directly or indirectly armissible deductions as defined in Regulations, Part or under the Copeland Act, as amended (48 Stat. 948, 145), and described below:	weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 C.F.R. Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Start. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145), and described below:
¬	ntractor) from the full	(Contractor or Subcontractor)
	O	ADVANCED POWER CONTROL, INC
	ling the 27 day of 5ep 1, 2015, e full weekly wages earned, that no rebates have behalf of said	all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said
	らららして トート らこ; that during the payroll period commencing on the	Mary Switzer Bick HHSS (Building or Work)
	itractor) on the	(Contractor or Subcontractor)
1		(1) That I pay or supervise the payment of the persons employed by ADVANCED POWER CONTROL. INC
		do hereby state:
	(Title)	(Name of Signatory Party)
	CONTROLLER	JEANNIE THWAITES
		Date 9/29/2015

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

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in the contract, except as noted in section 4(c) below.	basic hourly wage rate plus the amount of the required fringe benefits as listed	as indicated on the payroll, an amount not less than the sum of the applicable	 Each laborer or mechanic listed in the above referenced payroll has been paid,

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THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE ST. SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. 31 OF THE UNITED STATES CODE.	Jeannie Thwaites - Controller	REMARKS:				EXCEPTION (CRAFT)
THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION, SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.	(b) (6)					EXPLANATION

U.S. Department of Labor Wage and Hour Division

PAYROLL

(For Contractor's Optional Use; See Instructions at www.dol.gov/whd/forms/wh347instr.htm)

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NAME OF CONTRACTOR OR SUBCONTRACTOR N	CTOR D	SUBCONTRACTOR							ADDRE	38 126 SAN	ADDRESS 126 SANDY DRIVE, NEWARK, DELAWARE 19713	EWARK,	DELAWAR	E 19713			OMB No.: Expires:	OMB No.: 1235-0008 Expires: 01/31/2015
אסואיטא		VEIL COLVINGE, III													PRO IECT OR CONTRACT NO	CNTRACT	Ş	
PAYROLL NO.		FOR WEEK ENDING							PROJE	PROJECT AND LOCATION	NO.		644160		TROSECT ON C		į	
42			60	09/20/2015	015				Mary	Mary Switzer Building HHSC	ding HHSC				00054698			
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NAME AND INDIVIDUAL IDENTIFYING NUMBER (e.g.: LAST FOUR DIGITS OF SOCIAL SECURITY	OF THHOU DITAME	WORK	RO .TO	M	T ×	Α Τ	F	S	TOTAL	RATE	GROSS		WITH- HOLDING				TOTAL	WAGES
NUMBER) OF WORKER	EXE MI NO	CLASSIFICATION		오	URSV	VORKE	URS WORKED EACH DAY	DAY	HOURS	OF PAY	EARNED	FICA	TAX			OTHER	DEDUCTIONS	FOR WEEK
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While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week," U.S. Department of Labor (DOL) regulations at (40 U.S.C. § 345) contractors and subcontractors performing work on Federally financed or assisted constructing for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer	ory for co ning work ly a copy	overed contractors and subsidered confidenced or a confidenced or a confidenced or all payrolls to the Feder	contrac assister al ager	ctors pe d consti ncy con	ruction tracting	ng work contrac g for or	on Fede sts to "fur financing	arally fina mish wee	nced or as skly a state struction p	sisted construction ment with respect oject, accompar	on contracts to rest to the wages pair to the wages paired by a signed "s	spond to the iid each emp Statement of	information coll oyee during the Compliance" in	lection contain preceding v	ned in 29 C.F.R. § veek." U.S. Depa	\$ 3.3, 5.5(a) Intrinent of La orrect and co). The Copelan bor (DOL) regu omplete and the	J Act llations at at each laborer
Za Charty State Apply information to determine that employees have received legally required wages and fringe benefits. or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information to determine that employees have received legally required wages and fringe benefits.	Bacon pr	evailing wage rate for the v	vork pe	srforme	d. DOL	and fe	deral cor	ıtracting	agencies r	eceiving this info	rmation review the	e information	to determine the	nat employee	s have received le	gally require	d wages and I	inge benefits.

Public Burden Statement

We estimate that is will take an average of 55 minutes to complete this collection, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. If you have any comments regarding these estimates or any other aspect of this collection, including suggestions for reducing this burden, send them to the Administrator, Wage and Hour Division, U.S. Department of Labor, Room S3502, 200 Constitution Avenue, N.W. Washington, D.C. 20210

LER commencing	(b) WHERE FRINGE BENEFITS ARE PAID IN CASH — Each laborer or mechanic listed in the above reference as indicated on the payroll, an amount not less than the basic hourly wage rate plus the amount of the requirement in the contract, except as noted in section 4(c) below. (c) EXCEPTIONS EXCEPTION (CRAFT) EXPL	IGE BENEFITS ARE PAID IN CASH Each laborer or mechanic listed in the above referenced payroll has been paid as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in section 4(c) below. FION (CRAFT) EXPLANATION
	(c) EXCEPTIONS EXCEPTION (CRAFT)	EXPLANATION
(Building or Work) (Building or Work) ay of		
ADVANCED POWER CONTROL, INC		
(Contractor or Subcontractor)		
rom the full wages earned by any person, other than permissible deductions as defined in Regulations, Part rom the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 C.F.R. Subitile A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 33 Start. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145), and described below:		
		3
(2) That any payrolls otherwise under this contract required to be submitted for the above period are	REMARKS:	
correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.	ч	
(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.		
(4) That: (a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS	NAME AND TITLE Jeannie Thwaites - Controller	SIGNATURE
 in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in section 4(c) below. 	THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.	ATEMENTS MAY SUBJECT THE CONTRACTOR OR SEE SECTION 1001 OF TITLE 18 AND SECTION 23

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

(c) EXCEPTIONS

		(2)		
NAME AND TITLE	REMARKS:			EXCEPTION (CRAFT)
SIGNATURE				EXPLANATION

U.S. Department of Labor Wage and Hour Division

PAYROLL

(For Contractor's Optional Use; See Instructions at www.dol.gov/whd/forms/wh347instr.htm)

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ADVANCEL	D POWE	ADVANCED POWER CONTROL, INC							- 1.		Expires:	11/3/1/2015
PAYROLL NO.		FOR WEEK ENDING	O	PRO	PROJECT AND LOCATION	NO			PROJECT OR CONTRACT NO.	CONTRACT	O	
41			09/13/2015	Ma	Mary Switzer Building HHSC	ding HHSC		644160	00054698			
(1)	(2)	(3)	(4) DAY AND DATE		(9)	(2)			(8)			(6)
	ONS		.12 5						DEDUCTIONS			NET
(e.g., LAST FOUR DIGITS OF SOCIAL SECURITY (a.g., LAST FOUR DIGITS OF SOCIAL SECURITY (b.g., LAST FOUR DIGITS OF SOCIAL SECURITY	NO. OF WITHHOL EXEMPTION	WORK	M T W T F S HOURS WORKED EACH DAY	S S TOTAL	AL RATE	GROSS AMOUNT EARNED	FICA	WITH- HOLDING TAX		OTHER	TOTAL	WAGES PAID FOR WEEK
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(40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.564(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compilance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

We estimate that is will take an average of 55 minutes to complete this collection, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection, including suggestions for reducing this burden, send them to the Administrator, Wage and Hour Division, U.S. Department of Labor, Room S3502, 200 Constitution Avenue, N.W.

Date 9/16/2015 JEANNIE THWAITES	CONTROLLER
(Name of Signatory Party)	(Title)
(1) That I pay or supervise the payment of the persons employed by ADVANCED POWER CONTROL, INC	employed by TROL, INC
Intractor or Subcontr	during the payroll period commencing
day of Sept 2015, and ending the	ne 13 day of Sept 2015
roject have be ectly or indirec	weekly wages earned, that no rebates have alf of said
ADVANCED POWER CONTROL, INC	ROL, INC from the full
(Contractor or Subcontractor)	
weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 C.F.R. Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Start. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145), and described below:	s have been made either directly or indirectly sible deductions as defined in Regulations, Part der the Copeland Act, as amended (48 Stat. 948, and described below:
(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.	uired to be submitted for the above period are echanics contained therein are not less than the incorporated into the contract; that the classifications he work he performed.
(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.	are duly registered in a bona fide apprenticeship gnized by the Bureau of Apprenticeship and scognized agency exists in a State, are registered as Department of Labor.
(4) That: (a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS	PPROVED PLANS, FUNDS, OR PROGRAMS
in addition to the basic hourly wage rathe above referenced payroll, payme have been or will be made to approprie except as noted in section 4(c) below.	in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

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in the contract, except as noted in section 4(c) below.	basic hourly wage rate plus the amount of the required fringe benefits as listed	as indicated on the payroll, an amount not less than the sum of the applicable	Each laborer or mechanic listed in the above referenced payroll has been paid,

(c) EXCEPTIONS

	<i>ι</i> _λ	
NAME AND TITLE	REMARKS:	EXCEPTION (CRAFT)
SIGNATURE		EXPLANATION

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.

Jeannie Thwaites - Controller

Date: 10/01/2015

I, James Zeleny (Name of Signatory Party), President (Title) do hereby state:

(1) That I pay or supervise the payment of the persons employed by **Capital Demolition LLC** (Contractor or Subcontractor) on the **Grunley Construction Company GS11P14MKC0010** (Building or Work); that during the payroll period commencing on the **21st** day of **September**, **2015**, and ending the **27th** day of **September**, **2015**, all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said **Capital Demolition LLC** (Contractor or Subcontractor) from the full weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 C.F.R. Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145), and described below:

Deductions are based on gross wages and include but are not limited to: Federal Withholding, FICA, Medicare, State Withholding, State Disability Insurance, Union Deductions, Child Support or Other Garnishments. Explanations for deductions listed in the "Other Column are described on the Certified Payroll Report.

(2) That any payrolls otherwise under this contract required to be submitted for the

above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

 In addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in Section 4(c) below

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH
 \overline{\text{S}} - Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not

less than the sum of the applicable basic hourly wage rate plus the

amount of the required fringe benefits as listed in the contract, except as noted in Section 4(c) below.

(c) EXCEPTIONS

EXPLANATION				
EXCEPTION (CRAFT)				

REMARKS:

NAME AND TITLE James Zeleny, President THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE SYMPEMENTS FINAL SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.		
ames Zeleny , President HE WILLFUL FALSIFICATION OF ANY OF THE ABOVE SYMPTMENTS MAT SUBJECT HE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE JECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.	IAME AND TITLE	SIGNATU
THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAT SUBJECT HE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.	ames Zeleny , President	
THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.	THE WILLFUL FALSIFICATION OF ANY OF TI	HE ABOVE SYACIEMENTS IMAT SUBJECT
ECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES ODE.	THE CONTRACTOR OR SUBCONTRACTOR TO	O CIVIL OR CRIMINAL PROSECUTION. SE
ODE.	ECTION 1001 OF TITLE 18 AND SECTION 2	31 OF TITLE 31 OF THE UNITED STATES
	ODE.	

Revised December 2008, Expires 01/31/2018.

U. S. Department of Labor Wage and Hour Division

Contractor's Optional Use: See instruction at http://www.dol.gov/whd/forms/wh347instr. nd to the collection of information unless it displays a currently valid OMB control number

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Rev. Dec. 2008

Rev. Dec. 2008	Expires: 02/28/2018	.T NO.	(6)	NET WAGES PAID FOR WEEK									
NO. PAG.	Civilis No.: Expires:	PROJECT/CONTRACT NO. GS11P14MKC0010	(8) DEDUCTIONS - BASED ON GROSS WAGES FOR ALL PROJECTS	TOTAL									s ints
		PRO	S FOR ALL	OTHER									#2 Union Dues #4 Garnishments
			SS WAGE	I.V	#1 #2 #3 #4	#1 #2 #3 #4	#1 #2 #4	#1 #2 #3 #4	#1 #2 #3 #4	# # # # # # # # # # # # # # # # # # # #	# # # # # # # # # # # # # # # # # # # #	# # # # # # # # # # # # # # # # # # # #	
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	527 Chesapeake Ave Baltimore, MD 21225	nan Service	(8) DE	FWH	<i>n</i> 2								OTHER DEDUCTIONS KEY CODING: #1 Child Support #3 Medical
3 control number	527 Chesa	Switzer Health & Human Services	(7)	GROSS AMOUNT EARNED - THIS JOB/ALL JOBS									
currently valid OM		Switze	(9)	RATE OF PAY/CASH FRINGES									
ess it displays a	ADDRESS		(5)	TOTAL	1								
Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number		PROJECT AND LOCATION	(4) DAY AND DATE	9/22 9/23 9/24 9/25 9/26 HOURS WORKED EACH DAY	No Work Performed								
- 1	R X	PROJE(əw	Overtime o	Pe	TO	5 t	5 5 5	10 T2	TO TS	TO ST	p 2	5
	OR SUBCONTRACTOR X	FOR WEEK ENDING		WORK	o Work								
	NAME OF CONTRACTOR	PAYROLL No.	DIVIDIJAI	IDENTIFYING NUMBER (e.g., LAST EGO FOUR DIGITS OF SOCIAL SECURITY ED NUMBER (S. S. S									

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less that the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceeding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5 (a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of information review the information to determine that employees have received legally required wages and fringe benefits.

Public Burden Statement

We estimate that it will take an average of 55 minutes to complete this collection, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of Labor, Room S3502, information. If you have any comments regarding these estimates or any other aspect of this collection, including suggestions for reducing this burden, send them to the Administrator, Wage and Hour Division, U.S. Department of Labor, Room S3502, 200 Constitution Avenue, N.W. Washington, D.C. 20210

Date: 09/24/2015

I, James Zeleny (Name of Signatory Party), President (Title) do hereby state:

Demolition LLC (Contractor or Subcontractor) on the Grunley Construction Company GS11P14MKC0010 (Building or Work); that during the payroll period commencing on the 14th day of September, 2015, and ending the 20th day of September, 2015, all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said Capital Demolition LLC (Contractor or Subcontractor) from the full weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 C.F.R. Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145), and described below:

Deductions are based on gross wages and include but are not limited to: Federal Withholding, FICA, Medicare, State Withholding, State Disability Insurance, Union Deductions, Child Support or Other Garnishments. Explanations for deductions listed in the "Other Column are described on the Certified Payroll Report.

- (2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.
- (3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.
- (4) That:
- (a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

In addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in Section 4(c) below
 WHERE FRINGE BENEFITS ARE PAID IN CASH

= Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the

amount of the required fringe benefits as listed in the contract, except as noted in Section 4(c) below.

(c) EXCEPTIONS

EXPLANATION				
EXCEPTION (CRAFT)				

REMARKS:

NAME AND TITLE	SIGNA ⁻		
James Zeleny , President			
THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT	HE ABOVE STATE	EMENTS MAY SUBJEC	-
THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PRÓSECUTION. SEE	CIVIL OR CRIM	IINAL PROSECUTION.	SEE.
SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES	231 OF TITLE 31	OF THE UNITED STA	TES
CODE.			

Revised December 2008, Expires 01/31/2018.

Wage and Hour Division

Contractor's Optional Use: See instruction at http://www.dol.gov/whd/forms/wh347instr.

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Rev. Dec. 2008	OMB No.: 1235-0008 Expires: 02/28/2018	T NO.	(6)	NET WAGES PAID FOR WEEK																
Rev	OMB No.: Expires:	PROJECT/CONTRACT NO. GS11P14MKC0010	PROJECTS	TOTAL																s nts
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	altimore, MI		CTIONS - E	MCARE																UCTIONS oort
	527 Chesapeake Ave Baltimore, MD 21225	an Services	(8) DEDU	FWH																OTHER DEDUCTIONS KEY CODING: #1 Child Support #3 Medical
control number	527 Chesap	Switzer Health & Human Services	(7)	GROSS AMOUNT EARNED - THIS JOB/ALL JOBS					\											0 # #
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Persons are not required to respond to the collection of information unless it displays a	ADDRESS 527 Che	RIGHT LECT AND LOCATION	(4) DAY AND DATE	3dL 18 9/19 TH DAY	No Work Performed	ОТ	TS	ТО	SI	ТО	SI	от	Т	ОТ	LS	ТО	Т	ТО	TS	
	OR SUBCONTRACTOR X	FOR WEEK ENDING		WORK # CLASSIFICATION	No Work															
	NAME OF CONTRACTOR	PAYROLL No.	(1)	NAME AND MUDENTED ALL TO DEPUTIFYING NUMBER (e.g., LAST) PO POUR DIGITS OF SOCIAL SECURITY PROPERTY OF WORKER # 40																

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceeding week." Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less that the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5 (a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of information review the information to determine that employees have received legally required wages and fringe benefits.

Public Burden Statement

information. If you have any comments regarding these estimates or any other aspect of this collection, including suggestions for reducing this burden, send them to the Administrator, Wage and Hour Division, U.S. Department of Labor, Room S3502, We estimate that it will take an average of 55 minutes to complete this collection, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of 200 Constitution Avenue, N.W. Washington, D.C. 20210

U.S. Department of Labor

Wage and Hour Division

PAYROLL

(For Contractor's Optional Use; See Instructions at www.dol.gov/whd/forms/wh347instr.htm)

U.S. Wage and Hour Division Rev. Dec. 2008

Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number.

OMB No.: 1235-0008 Expires: 01/31/2015 NET WAGES PAID FOR WEEK 6) TOTAL PROJECT OR CONTRACT NO. OTHER G14.0312.1400 HEALTH INS (8) DEDUCTIONS STATE TAX WITH-I HOLDING MARY E SWITZER (HHSC) 330 C ST. SW WASHINGTON, DC 20230 FICA ADDRESS 935 BRENTWOOD RD NE WASHINGTON, DC 20018 GROSS AMOUNT EARNED PROJECT AND LOCATION RATE OF PAY TOTAL HOURS 27 S 26 WORKED EACH DAY S (4) DAY AND DATE Į, 25 TH 24 23 ≥ 09/27/2015 22 H Σ 21 .T2 90 .T0 S 0 S 0 (C) 0 S 0 0 S 0 S 0 S 0 FOR WEEK ENDING COLUMBIA WOODWORKING, INC. CLASSIFICATION WORK 3 OR SUBCONTRACTOR 7 MITHHOLDING WITHHOLDING EXEMPTIONS (2) NAME AND INDIVIDUAL IDENTIFYING NUMBER (e.g., LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER) OF WORKER NO WORK PERFORMED NAME OF CONTRACTOR E PAYROLL NO.

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 (C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

Public Burden Statement

We estimate that is will take an average of 55 minutes to complete this collection, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information of information. If you have any comments regarding these estimates or any other aspect of this collection, including suggestions for reducing this burden, send them to the Administrator, Wage and Hour Division, U.S. Department of Labor, Room S3502, 200 Constitution Avenue, N.W. Washington, D.C. 20210

Date 09/30/2015		(b) WHERE F
DENA NIHART	PAYROLL MANAGER	5
(Name of Signatory Party)	(Title)]
do hereby state:		
(1) That I pay or supervise the payment of the persons employed by COLUMBIA WOODWORKING, INC.	prsons employed by IORKING, INC.	(c) EXCEPTIC
(Contractor or Subcontractor) MARY E SWITZER (HHSC)	during the payroll period commencing	EXC
(Building or Work) 21 day of September 2015 and el	and ending the 27 day of September 2015	
yed on said project have bee ide either directly or indirectly	he full weekly wages earned, that no rebates have in behalf of said	
COLUMBIA WOODWORKING, INC.	DRKING, INC. from the full	
(Contractor or Subcontractor)		
weekly wages earned by any person and that no ded from the full wages earned by any person, other than 3 (29 C.F.R. Subtitle A), issued by the Secretary of Lz 63 Start. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. §	weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 C.F.R. Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Start. 108, 72 Stat. 967; 76 Stat. 357, 40 U.S.C. § 3145), and described below:	
		REMARKS:
(2) That any payrolls otherwise under this contract required to be submitted fr correct and complete; that the wage rates for laborers or mechanics contained the applicable wage rates contained in any wage determination incorporated into the α set forth therein for each laborer or mechanic conform with the work he performed.	(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.	NO WORK PERF
(3) That any apprentices employed in the above period are duly registered in a bona fide apprentice program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are regiswith the Bureau of Apprenticeship and Training, United States Department of Labor.	(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.	
(4) That: (a) WHERE FRINGE BENEFITS ARE PAID —	nat: (a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS	NAME AND TITLE DENA NIHART/ P.
in addition to the basic hourly wage rather above referenced payroll, payme have been or will be made to approprise except as noted in section 4(c) below.	in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe bene fits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in section 4(c) below.	THE WILLFUL FALSI SUBCONTRACTOR TO 31 OF THE UNITED ST

RINGE BENEFITS ARE PAID IN CASH

Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in section 4(c) below.

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EXPLANATION				
EXCEPTION (CRAFT)				

ORMED 9/21/2015 thru 9/27/2015

AYROLL MANAGER

FICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR OCIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE ATES CODE.

U.S. Department of Labor

U.S. Department o Wage and Hour Division

PAYROLL

(For Contractor's Optional Use; See Instructions at www.dol.gov/whd/forms/wh347instr.htm)

U.S. Wage and Hour Division Rev. Dec. 2008

Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number.

OMB No.: 1235-0008 Expires: 01/31/2015 NET WAGES PAID FOR WEEK 6) DEDUCTIONS TOTAL PROJECT OR CONTRACT NO. OTHER G14.0312.1400 HEALTH INS (8) DEDUCTIONS STATE WITH-HOLDING TAX 330 C ST. SW WASHINGTON, DC 20230 FICA ADDRESS 935 BRENTWOOD RD NE WASHINGTON, DC 20018 GROSS AMOUNT EARNED MARY E SWITZER (HHSC) PROJECT AND LOCATION RATE OF PAY 9 TOTAL (2) S 20 19 S (4) DAY AND DATE 8 Į1. Ξ 17 16 ≥ 09/20/2015 15 4 Σ .T2 90 .T0 0 S 0 Ø 0 S 0 S 0 ഗ 0 S 0 S 0 S FOR WEEK ENDING COLUMBIA WOODWORKING, INC. CLASSIFICATION WORK (3) OR SUBCONTRACTOR 7 NO. OF WITHHOLDING EXEMPTIONS (2) NAME AND INDIVIDUAL IDENTIFYING NUMBER (e.g., LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER) OF WORKER NO WORK PERFORMED NAME OF CONTRACTOR $\widehat{\Xi}$ 22 PAYROLL NO.

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 450 contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(a)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis. Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

Public Burden Statement

We estimate that is will take an average of 55 minutes to complete this collection, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection, including suggestions for reducing this burden, send them to the Administrator, Wage and Hour Division, U.S. Department of Labor, Room S3502, 200 Constitution Avenue, N.W. Washington, D.C. 20210

Date 09/23/2015		(b) WHERE
DENA NIHART	PAYROLL MANAGER	
(Name of Signatory Party)	(Title)	1
do hereby state:		
(1) That I pay or supervise the payment of the persons employed by COLITIMBIA WOODWORKING INC		(c) EXCEPT
COLOMBIA WOODWOINING,	on the	ί
(Contractor or Subcontractor) MARY E SWITZER (HHSC) ; that dur	actor) ; that during the payroll period commencing on the	Ω
(Building or Work) 14 Apr. of September 2015 and ending the	20 day of September 2015	
yyed on said project have be ade either directly or indirect	ly wages earned, that no rebates have aid	
COLUMBIA WOODWORKING, INC.	VC. from the full	
(Contractor or Subcontractor)		
weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 C.F.R. Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Start. 108, 72 Stat. 967, 76 Stat. 357, 40 U.S.C. § 3145), and described below:	been made either directly or indirectly deductions as defined in Regulations, Part e Copeland Act, as amended (48 Stat. 948, escribed below:	
		REMARKS:
(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete, that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.	o be submitted for the above period are cs contained therein are not less than the orated into the contract; that the classifications rk he performed.	NO WORK PER
(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.	ly registered in a bona fide apprenticeship I by the Bureau of Apprenticeship and zed agency exists in a State, are registered vartment of Labor.	
(4) That: (a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS	VED PLANS, FUNDS, OR PROGRAMS	NAME AND TITLE DENA NIHART/
 in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe bene fits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in section 4(c) below. 	baid to each laborer or mechanic listed in fringe bene fits as listed in the contract ograms for the benefit of such employees,	THE WILLFUL FAL SUBCONTRACTOR 31 OF THE UNITED

FRINGE BENEFITS ARE PAID IN CASH

Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in section 4(c) below. I П

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EXPLANATION				
EXCEPTION (CRAFT)				

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SIFICATION OF ANY OF THE ABOVE STÂTEINEMI, SAMAY SUBJECT THE CONTRACTOR OR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE STATES CODE.

U.S. DEPARTMENT OF LABOR

Employment Standards Admin. Wage and Hour Division

PAYROLL(For Contractor's Optional Use; See Instructions, Form WH-347)

Wages Week Net for State Medi. NO HOURS WORKED THIS WEEK APC Deductions M/H Fed 644160 FICA Address: 5744 J Industry Lane, Frederick MD 21704 Project No. Amount Earned Gross of Pay Rate Hours Total Project: MARY SWITZER BLDG. RENOV. Sn 2 ഗ 4 Day and Date H F က 2 ≥ 31 Σ 0 S S 0 0 S S 0 S 0 S 0 S 0 S 0 S 0 S 0 S Name of Subcontractor: Commercial Energy Systems, Inc. Classification ELECTRICIAN ELECTRICIAN APPRENTICE Work wk ending: 09/06/15 Middle Initial Ω 4 Social Security Number Name, Address, and of Employee **COLIN MATTHEWS** JOSEPH BLANK

GE BENEFITS ARE PAID IN CASH Each laborer or mechanlo listed in the above referenced payroll has been paid, as Indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in section 4(c) below.	EXPLANATION			SIGNATURE STATEMENTS (MAY SUBJECT THE CONTRACTOR OR EE SECTION 100 NOF TITLE 18 AND SECTION 231 OF TITLE
 (b) WHERE FRINGE BENEFITS ARE PAID IN CASH 	EXCEPTION (CRAFT)		REMARKS:	NAME AND TITLE CONTRACTOR SIGNATURE OFFICE Manager THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS (MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO GIVIL OR CRIMINAL PROSECUTION. SEE SECTION 100 NOF TITLE 18 AND SECTION 231 OF TITLE 13 AND SECTION 231 OF TITLE 18 AND SECTION 24 AND SECTION 251 OF TITLE 18 AND SECTION 251 OF TITLE 18 AND SECTION 251 OF TITLE 18 AND SECTION 251 OF TI
Mader Tillie)	eriod commencing on the	finer directly fined in Milectly fined in Regulations, Part as amended (48 Stat. 948,	or the above period are feln are not less than the line contract; that the ne performed. Intered in a bona fide prized by the Bureau of galzed egency exists in a Department of Labor.	NDS, OR PROGRAMS Ter or mechanic listed in as listed in the contract or the benefit of such
Date 9/11/15 1, Tracy Sevifiluce Office Manage (Name of Signatory Party) do hereby state: (1) That I pay or supervise the payment of the persons employed by October 10 (Contraction of Shooting of	Mary Sunction Bolle. Republished the payroll period commencing on the all persons employed on sald project have been paid the full weekly wages samed, that no rebates have been or will be made either directly or indirectly to or on behalf of said (Contractor or Subcontractor)	from the full wages earned by any person, other than permissible deductions as defined in Regulations, 73 (29 C.f.R. Subilitie A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 58 Stat. 357; 40 U.S.C. § 3145), and described below:	Control of the Contro	In addition to the basic hourly wage rates paid to each leborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in section 4(c) below.
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U.S. DEPARTMENT OF LABOR

Employment Standards Admin. Wage and Hour Division

PAYROLL(For Contractor's Optional Use; See Instructions, Form WH-347)

Name of Subcontractor: Commercial Energy Systems, Inc.	mercia	l Energy Systems, In	نِ					Addre	ss: 5744	J Indust	try Lane	e, Frede	Address: 5744 J Industry Lane, Frederick MD 21704	1704				
39	wk endi	wk ending: 08/30/15			Projec	II: Ma	S kin	witz	Project: Mary Switzer Bldg. Renov	29 . R	enev		Project No. WHYILD (APC Sub)	Cotti	LO CAP	1 Su	b.)	
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JOSEPH BLANK	٧	ELECTRICIAN	S	5.0			4.0			ဟ	9.00	38.32	344.88	21.38	1.03	5.00	21.08	296.39
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GE BENEFITS ARE PAID IN CASH Each laborer or machanic listed in the above referenced payroll has been paid, as indicated on the payroll, an emount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in section 4(c) below.	EXPLANATION	paid to Joseph	SIGNATURE (D) (G) SIMIEMENISH MAY SUBJECT THE CONTRACTOR OR EE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE
(b) WHERE FRINGE BENEFITS ARE PAID IN CASH Each laborer or mechanic listed in the as Indicated on the payroll, an emoubasic hourly wage rate plus the amount to EXCEPTIONS (c) EXCEPTIONS	EXCEPTION (GRAFT)	REMARKS. extra lash frings paid blank.	SIGNATURE OFFICE WILLY EAST I LECE THE WILLY EASINGS CODE. SIGNATURE SIGNATURE OFFICE OFFICE SIGNATURE SIGNATURE
Manager (Tillia)	Aud commencing on the ned, that no rebates have from the full from the full filled in Regulations, Part as amended (48 Stat, 948,	for the above period are rein are not less than the the contract; that the he performed.	NDS, OR PROGRAMS For or mechanic listed in as listed in the contract or the benefit of such
Tracy Serri LCCc Office Moneraby state: (1) That I pay or supervise the payment of the persons employed by Contraction (Contraction Service)	MADLE SUDITION (Building or Work) All Cay of Aug. 2005, and ending the 30 day of Aug	(2) That any payrolls otherwise under this contract required to be submitted for the above period are applicable wage rates for laborers or mechanics contained the fan are not less than the classifications set forth therein for each laborer or mechanic conform with the work he performed. (3) That any apprentices employed in the above period are duly registered in a bone fide Apprenticeship program registered with a State apprenticeship egency recognized by the Bureau of State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor, or If no such recognized egency exists in a table.	WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUI



U.S. Department of Labor Wage and Hour Division

(For Contractor's Optional Use; See Instructions at www.dol.gov/whd/forms/wh347instr.htm)

PAYROLL

Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number.

NAME OF CONTRACTOR OR SUBCONTRACTOR OF SUBCONTRACTOR OF CONTRACTOR OF SUBCONTRACTOR OF SUBC	TRACTOR	NTRACTOR [7] Creative Woodwork LLC		ADDRESS 111 Azalea Rd Colonial Beach, Va 22443	a Rd Colonial Bea	ich, Va 22443				OMB No.: Expires:	OMB No.: 1235-0008 Expires: 01/31/2015
		CONTRACT CALCING		PROJECT AND LOCATION	NO			PROJECT OR CONTRACT NO.	CONTRACT	NO.	
PATROLL INC. 36 26		NOT WEEN ENDING	09/13/2015	Mary E. Switzer Building (HHSC) 330 C Street SW Washington DC 20230	uilding (HHSC) Vashington DC 20	1230		G14.0312.1400	1400		
(1)	(2)	(3)	(4) DAY AND DATE	(5) (6)	(2)			(8)			(6)
	DING		T 8 9 10 11 12 13				DEDN	DEDUCTIONS			NET
NAME AND INDIVIDUAL IDENTIFYING NUMBER (e.g., LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER) OF WORKER	NO. OF WITHHOL	WORK CLASSIFICATION	6 M T W TH F S S HOURS WORKED EACH DAY	TOTAL RATE HOURS OF PAY	GROSS AMOUNT EARNED FICA	WITH- HOLDING	STATE	HEALTH INS	OTHER	TOTAL	ш.
Kenneth Phillips		CARPENTER	0		\$279.52		6				11.020
	_		8 0.00 8.00 0.00 0.00 0.00 0.00 0.00 0.	8.00 26.81 8.13	\$279.52	\$16.41	34.00			\$29.41	\$250.11
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William Thomas		owner	0								
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Jamel Dickerson	,	Laborer	0		\$126.72	80	00			80 89	27.7.17.7
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While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contractors and subcontractors negative financed construction contracts to "Lunish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 140 H.S. C. 8, 34.45) contractors negoting week." U.S. Department of Labor (DOL) regulations at	ndatory for	covered contractors and subc	contractors performing work on Federally finan ssisted construction contracts to "furnish weel	ced or assisted construction	in contracts to respond to the wages paid eac	o the information c employee during	ollection contain the preceding w	ned in 29 C.F.R week." U.S. De	8. 88 3.3, 5.5(a	a). The Copelan abor (DOL) regu	d Act ulations at
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29 C.F.R. § 5.6(a)(a)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls afe correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

Public Burden Statement

We estimate that is will take an average of 55 minutes to complete this collection, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection including suggestions for reducing this burden, send them to the Administrator, Wage and Hour Division, U.S. Department of Labor, Room S3602, 200 Constitution Avenue, N.W. Washington, D.C. 20210

eferenced havroll has been baid	than the sum of the applicable required fringe benefits as listed below.		EXPLANATION										COLOR OF THE PROPERTY OF THE P	ECT THE CONTRACTOR OR F TITLE 18 AND SECTION 231 OF TITLE
7 — Each laborer or machanic listed in the above referenced naviroll has been paid		(c) EXCEPTIONS	EXCEPTION (CRAFT)							REMARKS:		=	NAME AND TITLE William Thomas/owner	MENTS: SECT
owner of Creative Woodwork	(Title)	srsons employed by	work LLC on the intractor)	; that during the payroll period commencing on the	he full weekly wages earned, that no rebates have nehalf of said	ork LLC from the full	confractor) Lotions have been made either directly or indirectly	from the full wages earned by any person, other than permissible deductions as defined in regulations, if all 3 (29 C.F.R. Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Start. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145), and described below:			(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.	(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship ram registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and ning, United States Department of Labor, or if no such recognized agency exists in a State, are registered the Bureau of Apprenticeship and Training, United States Department of Labor.	nat: (a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS	in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe bene fits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in section 4(c) below.
William Thomas	(Name of Signatory Party) do hereby state:	(1) That I pay or supervise the payment of the persons employed by	(Contractor or Subcontractor)	Mary E. Switzer Suilding or Work) September 2015	ect have be ly or indirec	Creative Woodwork LLC	(Contractor or Subcontractor) weekly wages earned by any person and that no deductions have been made either	from the full wages earned by any person, other than permissible deductions as defined in Regulations, Fart 3 (29 C.F.R. Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 94 63 Start. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145), and described below:			(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classification set forth therein for each laborer or mechanic conform with the work he performed.	(3) That any apprentices employed in the above period are duly registered in a bona fide apprentice program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are regis with the Bureau of Apprenticeship and Training, United States Department of Labor.	(4) That (a) WHERE FRINGE BENEFITS ARE PAID 1	 in addition to the basic hourly wage rather above referenced payroll, payme have been or will be made to approprience. except as noted in section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

Date September 15, 2015

U.S. Department of Labor

Wage and Hour Division

PAYROLL

(For Contractor's Optional Use; See Instructions at www.dol.gov/whd/forms/wh347instr.htm)

U.S. Wage and Hour Division Rev. Dec. 2008

Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number.

[construction clean partners]			Elam Maintenance Services	200	13*01.0	101 Wall St Rockville MD 20850	lle MD 208	350		Expires:	OMB No.: 1235-0008 Expires: 01/31/2015
PAYROLL NO.		FOR WEEK ENDING	9	PROJEC	PROJECT AND LOCATION	NO	Was	Washington dc	PROJECT OR CONTRACT NO.	CT NO.	
II -final		6/21	6/21/15	Swit	Switzer HHS				GS11P14MKC0010 & G14.312.	30010 & G1	4.312.
(1)	(2)	(3)	(4) DAY AND DATE	(2)	(9)	(2)			(8)		(6)
	ONS		mor tues thurs sat	TE				_	DEDUCTIONS		F
NAME AND INDIVIDUAL IDENTIFYING NUMBER (e.g., LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER) OF WORKER	NO. OF WITHHOI EXEMPTI	WORK	18 19 20 RKED EACH DAY	TOTAL	RATE OF PAY	GROSS AMOUNT EARNED	FICA	WITH- HOLDING TAX	OTHER	TOTAL	WAGES PAID FOR WEEK
Vincent Murray(b) (6)		common laborer	0			79.2				8.08	
		SUDC2009-003 05/19/2009	25	5	15.84	79.2	4.91	1.15		8	
		common laborer	0					Archive Control			
		SUDC2009-003 05/19/2009	S	0	15.84		=	Y O			
vejay Roxburgh <mark>.(b) (6)</mark>		common laborer	0				2	no work			
		SUDC2009-003 05/19/2009	w	0	15.84	\					
Jesus Meija- (b) (6)		common laborer	0								
		SUDC2009-003 05/19/2009	w	0	15.84	\	no work	ork			
flor Benavides-(b) (6)		common laborer	0				July Ou				
		SUDC2009-003 05/19/2009	w		15.84	\	2	,			
Issac Jesse Reid		common laborer	0 16			79.2		L		90 9	01.00 mg
		SUDC2009-003 05/19/2018	5	5	15.84	79.2	4.91	J.15		3	73.14
JOVAN CRAWFORD		common laborer	0			79.2	4.91	1.15			73.14
		SUDC2009-003 05/19/2008	9 9	5	15.84	79.2				90.9	
			0								
			Ŋ			\					

29.C.F.R. § 55(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and fringe benefits. or nectanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits. 40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at

Public Burden Statement

We estimate that is will take an average of 55 minutes to complete this collection, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information of this collection, including suggestions for reducing this burden, send them to the Administrator, Wage and Hour Division, U.S. Department of Labor, Room S3502, 200 Constitution Avenue, N.W. Washington, D.C. 20210

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH	V		basic nouny wage rate plus the amount of the required it in the contract, except as noted in section 4(c) below.	(s) EXCEPTIONS		EXCEPTION (CRAFT)										DELIANDICO.	NEIWAKNO.
Date 6/22/15	david murray owner	(Name of Signatory Party) (Title)	do hereby state:	(1) That I pay or supervise the payment of the persons employed by	Elam Maintenance Services	(Contractor or Subcontractor)	Switzer HHS : that during the payroll period commencing on the	(Building or Work) 15 day of june 2015 and ending the 21 day of june 2015	ns employed on said project h	Elam Maintenance Services	(Contractor or Subcontractor)	weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wares earned by any person other than permissible deductions as defined in Regulations. Part	3 (29 C.F.R. Subtilie A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Start. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145), and described below:				

payroll has been paid, inge benefits as listed sum of the applicable

						to
EXPLANATION						Verified by PDFfiller 1
EXCEPTION (CRAFT)					qemarks:	

David Murray owner

in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe bene fits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in section 4(c) below.

1

(4) That:

NAME AND TITLE

correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(2) That any payrolls otherwise under this contract required to be submitted for the above period are

program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship

SIGNATURE

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRASFOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.

U.S. Department of Labor

Wage and Hour Division

PAYROLL

(For Contractor's Optional Use; See Instructions at www.dol.gov/whd/forms/wh347instr.htm)

U.S. Wage and Hour Division Rev. Dec. 2008

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	PROJECT OR CONTRACT NO.	GS11P14MKC0010 & G14.312.		"	OTHER																
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850	Washington dc				WITH- HOLDING TAX		1.84		J.C.	no work	work	no work no work	work	work work	work work	work work ork	work work 1.84	work work ork 1.84	ork work 1.38	ork 1.38 1.38	ork vork 1.38 1.38
rille MD 20	Wa				FICA		7.86			2	2 2	<u> </u>	2 2	no work	0 0 NO 84 7	n	no 7.866	nc 7.866	7.86 7.86 5.89	7.86 7.86 5.89	7.86 7.86 5.89
101 Wall St Rockville MD 20850	NOI		(7)		GROSS AMOUNT EARNED	126.72	126.72	,							126.72	126.72	126.72	126.72 126.72 95.04 95.04	126.72 126.72 95.04 95.04	126.72 126.72 95.04 95.04 95.04	126.72 126.72 95.04 95.04 95.04
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[construction clean partners]	PAYROLL NO.	Q.	(1)		NAME AND INDIVIDUAL IDENTIFYING NUMBER (e.g., LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER) OF WORKER	Vincent Murray (b) (6)					vejay Roxburgh-(0) (6)	vejay Roxburgh- <mark>(6) (6)</mark>	vejay Roxburgh- <mark>(b) (6)</mark> Jesus Meija <mark>(b) (6)</mark>	vejay Roxburgh- <mark>(b) (6)</mark> Jesus Meija <mark>(b) (6)</mark>	vejay Roxburgh-(0) (6) Jesus Meija (0) (6)	vejay Roxburgh-(b) (6) Jesus Meija(b) (6) flor Benavides-(b) (6)	vejay Roxburgh-(b) (6) Jesus Meija(b) (6) flor Benavides-(b) (6)	vejay Roxburgh-(b) (6) Jesus Meija (b) (6) flor Benavides-(b) (6)	vejay Roxburgh-(b) (6) Jesus Meija (b) (6) flor Benavides-(b) (6) Issac Jesse Reid (b) (6)	vejay Roxburgh-(0) (6) Jesus Meija (D) (6) flor Benavides-(D) (6) Issac Jesse Reid (D) (6)	vejay Roxburgh-(b) (6) Jesus Meija (b) (6) flor Benavides-(b) (6) Issac Jesse Reid (b) (6)

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 49 C.F.R, § 5.5(a)(3)(ii) require contractors and subcontractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information to determine that employees have received legally required wages and fringe benefits.

Public Burden Statement

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david murray owner	_	2	in the condition of the constant of the condition of the
(Name of Signatory Party)	(Title)	as indicated on the payroll, a	 Each laborer or nechanic listed in the above referenced payroil has been paid as indicated on the payroll, an amount not less than the sum of the applicable
do hereby state:		basic hourly wage rate plus the amount of the required in the contract, except as noted in section 4(c) below.	basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in section 4(c) below.
(1) That I pay or supervise the payment of the persons employed by	oyed by	SINCIFICIAL	
Elam Maintenance Services	att no	(c) EACET 110NS	
(Contractor or Subcontractor)	5	EXCEPTION (CRAFT)	EXPLANATION
Switzer HHS that dur	that during the payroll period commencing on the		
(Building or Work) 8 day of june 2015, and ending the 14 day of june	14 day of june , 2015		
ed on said project h de either directly or	dy wages earned, that no rebates have said		
Elam Maintenance Services	from the full		
(Contractor or Subcontractor)			
weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part	been made either directly or indirectly deductions as defined in Regulations, Part		
3 (29 C.F.R. Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145), and described below:	re Copeland Act, as amended (48 Stat. 948, lescribed below:		
		REMARKS:	
(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.	o be submitted for the above period are cs contained therein are not less than the orated into the contract; that the classifications rk he performed.		

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

6/22/15

Date

					j	- I
EXPLANATION						Verified by PDFfiller
EXCEPTION (CRAFT)					JEMARKS:	

owner David Murray NAME AND TITLE

program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

(4) That:

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship

SIGNATURE

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRASFOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.

in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe bene fits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in section 4(c) below.



Rev. Dec. 2008

U.S. Department of Labor

Wage and Hour Division

PAYROLL

(For Contractor's Optional Use; See Instructions at www.dol.gov/whd/forms/wh347instr.htm)

Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number.

OMB No.: 1235-0008 Expires: 01/31/2015 NET WAGES PAID FOR WEEK (6) GS11P14MKC0010 & G14.312 TOTAL DEDUCTIONS PROJECT OR CONTRACT NO. OTHER (B) DEDUCTIONS no work no work no work no work WITH-HOLDING TAX 101 Wall St Rockville MD 20850 FICA GROSS AMOUNT EARNED E PROJECT AND LOCATION 15.84 Switzer HHS RATE OF PAY 15.84 15.84 15.84 (9) 15.84 ADDRESS TOTAL (2) 50 Work WDrk wdrk no work 881 9 Work (4) DAY AND DATE S 9 D 9 V 0 Elam Maintenance Services wed n tues , mon 6/7/15 .T2 RD .TO 0 0 0 0 0 2 0 w 0 0 0 Ø 2 SUDC2009-003 05/19/2009 FOR WEEK ENDING SUDC2009-003 05/19/2009 SUDC2009-003 05/19/2009 SUDC2009-003 05/19/2009 SUDC2009-003 05/19/2009 common laborer common laborer common laborer common laborer common laborer CLASSIFICATION WORK 3 OR SUBCONTRACTOR X NO, OF MITHHOLDING EXEAPTIONS 3 NAME AND INDIVIDUAL IDENTIFYING NUMBER (eg., LAST FOUR DIGITS OF SOCIAL SECURITY [construction clean partners] NUMBER) OF WORKER flor Benavides-(b) (6 NAME OF CONTRACTOR ε J Vincent Murray vejay Roxburgh-David Murray -Jesus Meija-0 PAYROLL NO. O

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work or Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the proceeding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of oil payruls to the Federal agency contracting for or financing the construction project, accompanied by a signed 'Statement of Compliance' indicating that the payrolis are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal agencies receiving this information teview the information be determine that employees have received legally required wages and fininge been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal agencies receiving this information teview the information become

Public Burden Statement

We estimate that is will take an avarage of 55 minutes to complete this collection, including turns for reviewing instructions, searching existing data sources, gathering and maintaining the deat an additional contents regarding these estimates or any other aspect of this collection, including suggestions for reducing this burden, send them to the Administrator, Wage and Hour Division, U.S. Department of Labor, Room S3502, 200 Constitution Avenue, N.W. Washington, D.C. 20210

6/15/2015 david murray owner critics	(b) WHERE FRINGE BENEFITS ARE PAID I
ту Рапу)	
(1) That I pay or supervise the payment of the persons employed by Elam Maintenance Services	(c) EXCEPTIONS
声	EXCEPTION (CRAFT)
(Building or Work) (Building or Work) Today of June 2015, and ending the 7 day of June 2015.	
all persons employed on said project have been paid the full weekly wages eamed, that no rebates have been or will be made either directly or Indirectly to or on behalf of said	
(Contractor or Subcontractor)	
weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 C.F.R. Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948,	
	DEMARKS:
	בריים:
(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.	
(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.	
GE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS	NAME AND TITLE
In addition to the basic hourly wage rates paid to each laborer or mechanic listed in	David Murray owner
the above referenced payroll, payments of fringe bene fits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in section 4(c) below.	THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE ST SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. 31 OF THE UNITED STATES CODE.

N CASH

isted in the above referenced payroll has been paid, an amount not less than the sum of the applicable the amount of the required fringe benefits as listed toted in section 4(c) below.

EXCEPTION (CRAFT)	EXPLANATION
NAME AND TITLE	SICANATIBE
	SIGNATURE

ATEMENTS MAY SUBJECT THE CONTRACTOR OR SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE

U.S. Department of Labor Wage and Hour Division

(For Contractor's Optional Use; See Instructions at www.dol.gov/whd/forms/wh347Instr.htm)

U.S. Wage and Hour Division

OMB No.: 1235-0008 Expires: 01/31/2015 TOTAL PAID DEDUCTIONS FOR WEEK GS11P14MKC0010 & G14.312 6 Rev. Dec. 2008 PROJECT OR CONTRACT NO. OTHER (8) DEDUCTIONS no work no work no work no work Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number. WITH-HOLDING TAX 101 Wall St Rockville MD 20850 FICA GROSS AMOUNT EARNED 3 PROJECT AND LOCATION 15.84 RATE OF PAY 15.84 Switzer HHS 15.84 15.84 9 15.84 ADDRESS TOTAL 3 3 SLA Wbrk wbrk 30 work HOURS WORKED FACH DA 88 no work no work (4) DAY AND DATE 28 00 thurs 0 28 Elam Maintenance Services 27 l mon tues 26 25 5/31/15 J2 3D .TO 0 0 SUDC2009-003 05/19/2008 S 10 Q Ø 0 IJ 0 Ø 0 43 0 (2) 0 FOR WEEK ENDING SUDC2009-003 05/19/2009 SUDC2009-003 05/19/2009 SUDC2009-003 05/19/2009 common laborer common laborer common laborer common laborer CLASSIFICATION 3 OR SUBCONTRACTOR X 40.0F MITHHOLDING EXEMPTIONS (5) NAME AND INDIVIDUAL IDENTIFYING NUMBER (e.g., LAST FOUR DIGITS OF SOCIAL SECURITY [construction clean partners] NUMBER) OF WORKER flor Benavides-(D) (6 NAME OF CONTRACTOR Vincent Murray -3544 Ξ vejay Roxburgh-QO Jesus Meija-(D) PAYROLL NO.

While completion of Form WH-347 is optional, it is mandationy for covered contractors and subcontractors performing work on Federally financed or assistant contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulators at 29 C.F.R. § 5.5(a), in aquire contractors and subcontractors performing work on Federal agency contracting for or financial for for or financial for f nechanic has been paid not test than the proper Davia-Baccon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe beneaths

Public Burden Statement

We estimate that is will take an average of 55 minutes to complete this collection, including time for reviewing instructions, searching existing data sources, gathering and maintaining the deal model and reviewing the collection of information of the collection of the collection for reducing suggestions for reducing this burden, send them to the Administrator, Wage and Hour Division, U.S. Department of Labor, Recan S3502, 200 Constitution Avenue, N.W. Washington, D.C. 20210

david muray owner		black and a self-self-self-self-self-self-self-self-
(Name of Signatory Party) (Title)	I	cach laborer of medianic listed in the above reterenced payror has been paul, as Indicated on the payroll, an amount not less than the sum of the applicable
do hereby state:	basic hourly wage rate plus the amount of the required in the contract, except as noted in section 4(c) below.	basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, excent as noted in section 4(c) below.
(1) That I pay or suparvise the payment of the persons employed by	ON EXCEPTIONS	
Elam Maintenance Services	(c) Excer lions	
(Contractor or Subcontractor)	EXCEPTION (CRAFT)	EXPLANATION
SWitzer HHS ; that during the payroll period commencing on the		
(Bullding or Work)		
25th day of May , 2015, and ending the 31st. day of May , 2015,		
all persons employed on sald project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or Indirectly to or on behalf of sald		
Elam Maintenance Services		
(Contractor or Subcontractor)		
waekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wants carned by any person other than normissible deductions as defined in Regulations. Part		
3 (29 C.F.R. Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Start. 108, 72 Stat. 987; 76 Stat. 357; 40 U.S.C. § 3145), and described below:		
	REMARKS:	
(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not lass than the applicable wage rates contained in any wage detarmination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.		
(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.	91	
(4) That: (a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS	NAME AND TITLE	SIGNATURE
In addition to the basic hourly wage rates paid to each jaboror or mechanic listed in	David Murray owner	(9) (q)
the above referenced payroli, payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees,	THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCOMMINATION TO CONL. ON CHAMINAL PROSECUTION, SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 33 OF THE IMPED STATES CODE	EMENTS MAY SUBJECT THE CONTRACTOR OR EE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE
except as noted in section 4(c) below.	of of the summer summer some	

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

Date 6/7/15

U.S. Department of Labor

Wage and Hour Division

PAYROLL

(For Contractor's Optional Use; See Instructions at www.dol.gov/whd/forms/wh347instr.htm)

U.S. Wage and Hour Division Rev. Dec. 2008

OMB No.: 1235-0008 Expires: 01/31/2015 NET WAGES PAID FOR WEEK 160.91 87.77 87.77 73.14 87.77 6) GS11P14MKC0010 & G14.312 TOTAL 13.33 7.27 90.9 7.27 7.27 PROJECT OR CONTRACT NO. OTHER (8) DEDUCTIONS Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number. WITH-HOLDING TAX 1.15 1.38 2.53 1.38 1.38 101 Wall St Rockville MD 20850 10.80 5.89 5.89 4.91 FICA 5.89 95.04 95.04 79.2 95.04 GROSS AMOUNT EARNED 174.24 174.24 95.04 95.04 79.2 95.04 8 PROJECT AND LOCATION 15.84 15.84 RATE OF PAY 15.84 15.84 Switzer HHS 15.84 (9) 15.84 ADDRESS TOTAL (2) 24 23 WORKED EACH DAY sat (4) DAY AND DATE 22 thurs 21 Elam Maintenance Services 20 6 tues 2 2 mon 8 9 9 9 9 5/24/15 .TS 90 .TO 0 0 S 0 co 0 SUDC2009-003 05/19/2009 SUDC2009-003 05/19/2009 S s 0 S 0 S 0 FOR WEEK ENDING SUDC2009-003 05/19/2009 SUDC2009-003 05/19/2009 SUDC2009-003 05/19/2009 SUDC2009-003 05/19/2009 common laborer common laborer common laborer common laborer common laborer common laborer CLASSIFICATION WORK 3 OR SUBCONTRACTOR X NO. OF WITHHOLDING EXEMPTIONS (2) NAME AND INDIVIDUAL IDENTIFYING NUMBER (e.g., LAST FOUR DIGITS OF SOCIAL SECURITY [construction clean partners] JOVAN CRAWFORD Issac Jesse Reid NUMBER) OF WORKER Vincent Murray -3544 NAME OF CONTRACTOR Ξ flor Benavidesvejay Roxburgh-Jesus Meija-PAYROLL NO.

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to "turnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors and subcontractors performing work on Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

Public Burden Statement

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							00000										
Each laborer or mechanic listed in the above referenced neverall has been noid	as indicated on the payroll, an amount not less than the sum of the applicable	basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in section 4(c) below.			EXPLANATION												
X — Each laborar or machanic list		basic hourly wage rate plus the amount of the required in the contract, except as noted in section 4(c) below.	SINCIFICIONS		EXCEPTION (CRAFT)						ı				REMARKS:		
owner	(Title)	4/26/15		o di	()	; that during the payroll period commencing on the	24 day of may 2015.	reekly wages earned, that no rebates have of said	from the full		lave been made either directly or indirectly	or the Copeland Act, as amended (48 Stat. 948, and described below:				ed to be submitted for the above period are natics contained therein are not less than the	work he performed.
david murray ow	(Name of Signatory Party)	do hereby state:	(1) That I pay or supervise the payment of the persons employed by	Elam Maintenance Services	(Contractor or Subcontractor)	Switzer HHS ; that	(Building or Work) 18 ray of may 2015 and ending the	ed on said project h	Elam Maintenance Services	(Contractor or Subcontractor)	weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person other than permissible deductions as defined in Remitations. Part	3 (29 C.F.R. Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Start. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145), and described below:				(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the correct and contract that the change of the contract that the classifications	applicable wage rates contained in any wage determination incorporated into the set forth therein for each laborer or mechanic conform with the work he performed.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

5/29/2015

Date

NAME AND TITLE

program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

(4) That:

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship

EXPLANATION					
EXCEPTION (CRAFT)					REMARKS:

owner David Murray

in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe bene fits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in section 4(c) below.

SIGNATURE

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATES SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.

U.S. Department of Labor Wage and Hour Division

PAYROLL

(For Contractor's Optional Use; See Instructions at www.dol.gov/whd/forms/wh347instr.htm)

J.S. Wage and Hour Division Rev. Dec. 2008

OMB No.: 1235-0008 Expires: 01/31/2015 \$555.87 NET WAGES PAID FOR WEEK \$555.87 \$555.87 555.87 555.87 \$555.87 GS11P14MKC0010 & G14.312 (6) TOTAL 46.05 46.05 46.05 46.05 46.05 46.05 PROJECT OR CONTRACT NO. OTHER (8) DEDUCTIONS Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number Washington dc WITH-HOLDING TAX 8.73 8.73 8.73 8.73 8.73 8.73 101 Wall St Rockville MD 20850 37.32 37.32 37.32 37.32 37.32 37.32 FICA 601.92 601.92 601.92 601.92 601.92 601.92 GROSS AMOUNT EARNED 601.92 601.92 601.92 601.92 601.92 E 601.92 PROJECT AND LOCATION Switzer HHS 15.84 15.84 RATE OF PAY 15.84 15.84 15.84 15.84 (9) 15.84 ADDRESS TOTAL 38 38 38 38 (2) 38 38 17 Sun 16 sal (4) DAY AND DATE ζū 8 ω ထ တ 8 ∞ 8 thur 4 φ 8 8 8 œ Elam Maintenance Services wed 13 9 9 9 9 9 9 tues တ ω တ ø တ 8 mon Ξ 8 ω 8 8 8 8 5/17/15 OT, OR ST. 0 S 0 S 0 w w S 0 0 S SUDC2009-003 05/19/2008 SUDC2009-003 05/19/2008 FOR WEEK ENDING common laborer SUDC2009-003 05/19/2009 SUDC2009-003 05/19/2009 SUDC2009-003 05/19/2009 SUDC2009-003 05/19/2009 common laborer common laborer common laborer common laborer common laborer WORK 3 NO, OF EXEMPTIONS OR SUBCONTRACTOR (7) NAME AND INDIVIDUAL IDENTIFYING NUMBER (e.g., LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER) OF WORKER [construction clean partners] flor Benavides (O) (6) Vincent Murray-3544 NAME OF CONTRACTOR Ξ Q JOVAN CRAWFORD vejay Roxburgh Issac Jesse Reid-Jesus Meija-PAYROLL NO.

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at (40 U.S.C. § 3445) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding weekl." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

Public Burden Statement

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david murray	owner	N = Each Jahorer or machanin lis	Each Jahorzar or machanic listed in the above referenced navroll has been no
(Name of Signatory Party)	(Tille)		as indicated on the payroll, an amount not less than the sum of the applicab
do hereby state:		basic hourly wage rate plus the amount of the require in the contract, except as noted in section 4(c) below.	basic hourly wage rate plus the amount of the required fringe benefits as list in the contract, except as noted in section 4(c) below.
(1) That I pay or supervise the payment of the persons employed by	persons employed by	ONOTED DAY	
Elam Maintenance Services	arth no	(2)	
(Contractor or Subcontractor)		EXCEPTION (CRAFT)	EXPLANATION
Switzer HHS	; that during the payroll period commencing on the		
ilding or Work)			
all persons employed on said project have been paid the full weekly w been or will be made either directly or indirectly to or on behalf of said	ages eamed, that no rebates		
Elam Maintenance Services	from the full		
(Contractor or Subcontractor)			
weekly wages earned by any person and that no de from the full wages earned by any person, other than 3 (29 C.F.R. Subtitle A), issued by the Secretary of L.	weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 C.F.R. Subtille A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948,		
63 Start. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145), and described below:	3 3145), and described below:		
		REMARKS:	
(2) That any payrolls otherwise under this contr correct and complete; that the wage rates for laborer	(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the		

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

5/22/15

Date_

						[= -]
EXPLANATION						Verified by PDFfiller
EXCEPTION (CRAFT)					EMARKS:	

owner David Murray NAME AND TITLE

applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship

0 SIGNATURE

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRASFOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.

in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of finige bene fits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in section 4(c) below.

١

(4) That:

Wage and Hour Division

PAYROLL

(For Contractor's Optional Use; See Instructions at www.dol.gov/whd/forms/wh347instr.htm)

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U.S. Wage and Hour Division Rev. Dec. 2008

OMB No.: 1235-0008 Expires: 01/31/2015 731.41 731.41 731.41 NET WAGES PAID FOR WEEK 731.41 731.41 731.41 (6) GS11P14MKC0010 & G14.312 TOTAL 60.588 60.588 60.588 60.588 60.588 60.588 PROJECT OR CONTRACT NO. OTHER (8) DEDUCTIONS 11.484 11.484 WITH-HOLDING TAX 11.484 11.484 11.484 11.484 101 Wall St Rockville MD 20850 49.104 49.104 49.104 49.104 49.104 49.104 FICA 792 792 792 792 GROSS AMOUNT EARNED 792 792 3 792 792 792 792 792 792 PROJECT AND LOCATION 15.84 15.84 RATE OF PAY 15.84 15.84 15.84 Switzer HHS 9 15.84 ADDRESS TOTAL 20 20 20 20 (2) 20 20 9 ∞ 8 8 sal 6 ∞ ∞ ∞ (4) DAY AND DATE ω 1 1 10 WORKED 10 10 thur 10 810 0 Elam Maintenance Services 8 9 ∞ ∞ ∞ 8 tues 0 2 6 6 6 6 6 mor æ ω 8 8 8 8 5/10/15 TS RO TO 0 SUDC2009-003 05/19/2009 S w Ø S 0 0 co 0 Ŋ 0 0 S FOR WEEK ENDING SUDC2009-003 05/19/2009 SUDC2009-003 05/19/2009 SUDC2009-003 05/19/2009 SUDC2009-003 05/19/2009 SUDC2009-003 05/19/2009 common laborer common laborer common laborer common laborer common laborer common laborer CLASSIFICATION WORK 3 OR SUBCONTRACTOR X NO, OF WITHHOLDING EXEMPTIONS (2) NAME AND INDIVIDUAL IDENTIFYING NUMBER (e.g., LAST FOUR DIGITS OF SOCIAL SECURITY [construction clean partners] NUMBER) OF WORKER JOVAN CRAWFORD Issac Jesse Reid<mark>(D) (6</mark> flor Benavides-(O) (6 Jesus Meija- (b) (6) NAME OF CONTRACTOR Ξ Vincent Murray (b) 15 vejay Roxburgh-PAYROLL NO.

29 C.F.R. § 5.5(a)(a)) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and fringe benefits. or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information teview the information to determine that employees have received legally required wages and fringe benefits. White completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information contractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (20Cl.) regulations at

Public Burden Statement

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david murray	owner	oil oinntoon to torothe the	biog and and llowing boundary overland in the
(Name of Signatory Party)	(Title)	as indicated on the payroll, a	as indicated on the payroll, an amount not less than the sum of the applicable
do hereby state:		basic hourly wage rate plus t	basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract except or noted in position (10) below
(1) That I pay or supervise the payment of the persons employed by	4/26/15 sons employed by	in the contract, except as noted in section 4(c) below.	ed III section 4(c) below.
		(c) EXCEPTIONS	
Elam Maintenance Services	on the		
(Contractor or Subcontractor)		EXCEPTION (CRAFT)	EXPLANATION
Mary E. Switzer Building in Washington, DC	; that during the payroll period commencing on the		
(Building or Work)			
4 day of may 2015, and ending the	ling the 10 day of may , 2015,		
red on said project have be de either directly or indirec	e full weekly wages earned, that no rebates have behalf of said	-	
Elam Maintenance Services	from the full		
(notoentacod)			
weekly wages earned by any person and that no deductions have been made either directly or indirectly.	intractor) ctions have been made either directly or indirectly		
from the full wages earned by any person, onter than permissible deductions as define 3 (29 C.F.R. Subtitle A), issued by the Secretary of Labor under the Copeland Act, as 63 Start. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145), and described below:	eninssing deductions as defined in regulations, rangor under the Copeland Act, as amended (48 Stat. 948, 145), and described below:		
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		REMARKS:	8
(n) The time second second and the contract to be submitted for the characteristic and the phase nation are	era pointed for the above period are		
(c) That any payons outeness under any contract required to softliness of the first any payons outenessed in the contract of the first the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage of elemination incorporated into the contract; that the classification is a contract of the contract of the contract of the contract of the classification in the contract of the contract of the classification in the contract of the contract of the classification in the contract of the contract of the classification in the contract of the contra	correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications		
set forth therein for each laborer or mechanic conform with the work he performed.	with the work he performed.		

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

5/15/2015

Date

owner David Murray NAME AND TITLE

program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION, SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.

in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe bene fits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in section 4(c) below.

I

(4) That:

Wage and Hour Division

PAYROLL

(For Contractor's Optional Use; See Instructions at www.dol.gov/whd/forms/wh347instr.htm)

U.S. Wage and Hour Division Rev. Dec. 2008

Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number.

NAME OF CONTRACTOR (1) (1) (2) (1) (2) (3) (4) (4) (5) (4) (5) (6) (6) (6) (6) (7) (7) (8) (8) (9) (9) (9) (9) (1) (1) (2) (2) (3) (4) (4) (5) (6) (6) (6) (6) (6) (6) (6	Elam Maintenance Services	ADDRESS 101 W	101 Wall St Rockville MD 20850	D 20850		OMB No.: 1235-0008 Expires: 01/31/2015	1/31/2015
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CIAL SECURITY NO. OF WITHOUSING NO. OF WITHOUSING ERR EXEMPTIONS	5/3/15	Switzer HHS			GS11P14MKC0010 & G14.312	00010 & G	14.312
CING NUMBER SECURITY NO OF WITHHOLDING EXEMPTIONS	(3) (4) DAY AND DATE	(2) (6)	(2)		(8)		(6)
CIAL SECURITY OF WITHOUT OF WITHOUT ON WITHO	mon			DEC	DEDUCTIONS		F
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	common laborer o		459.36				\$413.49
	SUDC22009-003 05/19/2008 8 7 6 8 8	29 15.84	459.36 32	32.89 12.98		0.00	2
	common laborer o		459.38				
	SUDC2009-003 05/19/2009 s 7 6 8 8	29 15.84	459.36	32.89 12.98		45.87	\$413.49
vejay Roxburgh-(b) (6)	common laborer		459.36	12.98			
	SUDC2009-003 05/19/2009 8 8 8 8	29 15.84	459.36	n		45.87	\$413.49
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	SUDCZ009-003 05/19/2009 S 7 6 8 8	29 15.84	459.36 32.89			45.87	4413.49
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	subcz009-003 05/19/2009 s 7 6 8 8	29 15.84	459.36	12.98		45.87	\$413.49
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While completion for the mediatory for covered contractors and subcontractors performing work on Federally Inflanced or assisted constitution contracts to the manage of the manage of the mediator of the mediator of the manage of the manage

Public Burden Statement

We estimate that is will take an average of 55 minutes to complete this collection, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. If you have any comments regarding these estimates or any other aspect of this collection, including suggestions for reducing this burden, send them to the Administrator, Wage and Hour Division, U.S. Department of Labor, Room \$3502, 200 Constitution Avenue, N.W. Washington, D.C. 20210

(over)

david murray (Name of Signatory Party)	owner (Title)	 ✓ Each laborer or mechanic li as indicated on the payroll, 	Each laborer or mechanic listed in the above referenced payroll has been as indicated on the payroll, an amount not less than the sum of the applica
do hereby state:		basic hourly wage rate plus the amount of the required in the contract, except as noted in section 4(c) below.	basic hourly wage rate plus the amount of the required fringe benefits as line the contract, except as noted in section 4(c) below.
(1) That I pay or supervise the payment of the persons employed by	sons employed by	SNOTE EXECUTED SNOTE	
Elam Maintenance Services	eff do		
(Contractor or Subcontractor)		EXCEPTION (CRAFT)	EXPLANATION
Mary E. Switzer Building in Washington, DC	that during the payroll period commencing on the		
(Building or Work) 2015 and ending the	ing the 3 day of may 2015		
all persons employed on said project have been paid the full weekly w been or will be made either directly or indirectly to or on behalf of said	all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said		
Elam Maintenance Services	from the full		
(Contractor or Subcontractor)			
wages earned by any person and that no deduc it full wages earned by any person, other than pe F.R. Subtitle A), issued by the Secretary of Lab . 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3	weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 C.F.R. Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145), and described below:		
		REMARKS:	
That any payrolls otherwise under this contract	(2) That any payrolls otherwise under this contract required to be submitted for the above period are		

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

5/8/15

Date

paid, able isted

EXPLANATION						Verified by PDF filler
EXCEPTION (CRAFT)					EMARKS:	

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION, SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.

0

David Murray owner

in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of finige bene fits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in section 4(c) below.

1

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

NAME AND TITLE

applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

Wage and Hour Division

PAYROLL

(For Contractor's Optional Use; See Instructions at www.dol.gov/whd/forms/wh347instr.htm)

J.S. Wage and Hour Division Rev. Dec. 2008

OMB No.: 1235-0008 Expires: 01/31/2015 NET WAGES PAID FOR WEEK (6) GS11P14MKC0010 & G14.312 DEDUCTIONS TOTAL PROJECT OR CONTRACT NO. OTHER (8) DEDUCTIONS no work no work no work no work Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number. WITH-HOLDING TAX 101 Wall St Rockville MD 20850 FICA GROSS AMOUNT EARNED 3 PROJECT AND LOCATION 15.84 Switzer HHS RATE OF PAY 15.84 15.84 (9) 15.84 ADDRESS TOTAL (2) 56 Work 2021 1223 2425 WORKED FACH DAY work work no wdrk No work (4) DAY AND DATE 9 0 thurs Elam Maintenance Services Wed 26-15 mon tues TS 90 ,TO 0 SUDC2009-003 05/19/2009 | S S 0 co S SUDC2009-003 05/19/2008 S SUDC2009-003 05/19/2009 s SUDC2009-003 05/19/2009 | s 0 0 1 FOR WEEK ENDING SUDC2009-003 05/19/2009 common laborer common laborer common laborer common laborer common laborer CLASSIFICATION WORK 3 OR SUBCONTRACTOR X NO. OF WITHHOLDING EXEMPTIONS NAME AND INDIVIDUAL IDENTIFYING NUMBER (e.g., LAST FOUR DIGITS OF SOCIAL SECURITY 6626 Adrian St. Hyattsville, MD 20784 [construction clean partners] 404 Blue Silk T2 Gaithersburgh, MD 20877 920 Frederick St. #30. Arlington, VA 22204 1344 Spring Hill Rd. McLean VA 22102 101 Wall Street Rockville MD 20850 NUMBER) OF WORKER NAME OF CONTRACTOR flor Benavides-David Murray - 10) Vincent Murray (D) 9 vejay Roxburgh-Jesus Meija-PAYROLL NO.

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 55(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal confracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

Public Burden Statement

We estimate that is will take an average of 55 minutes to complete this collection, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection, including suggestions for reducing this burden, send them to the Administrator, Wage and Hour Division, U.S. Department of Labor, Room S3502, 200 Constitution Avenue, N.W. Washington, D.C. 20210

Date		
	(b) WHERE FRINGE BENEFITS ARE PAID IN CASH	CASH
l, david murray owner	2	
(Name of Signatory Party) (Title)	L∆I — Each laborer or mechanic list as indicated on the payroll, s	LM — Each laborer or mechanic listed in the above referenced payroll has been as indicated on the payroll, an amount not less than the sum of the annlics
do hereby state:	basic hourly wage rate plus the amount of the required in the contract except as noted in section 4(*) below	basic hourly wage rate plus the amount of the required fringe benefits as lin the contract except as noted in section 4(x) below
(1) That I pay or supervise the payment of the persons employed by		commence of the commence of th
	(c) EXCEPTIONS	
(Contractor or Subcontractor)	EXCEPTION (CRAFT)	EXP. ANATION
Switzer HHS		
(Building or Work)		
20 day of April 2015, and ending the 26 day of April 2015		
no rebe		
Elam Maintenance Services		
(Confractor or Subconfractor)		
weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any nerson, other than permissible deductions as defined in Regulations. Part		
3 (29 C.F.R. Subtitite A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Start. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145), and described below.		
	REMARKS:	
(2) That any payrolls otherwise under this contract required to be submitted for the above period are		
correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the		

6/15/2015

paid, able isted

EXPLANATION					
EXCEPTION (CRAFT)					REMARKS:

David Murray owner

in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe bene fits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in section 4(c) below.

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

(4) That:

NAME AND TITLE

applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

SIGNATURE

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Wage and Hour Division

PAYROLL

(For Contractor's Optional Use; See Instructions at www.dol.gov/whd/forms/wh347instr.htm)

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J.S. Wage and Hour Division

OMB No.: 1235-0008 Expires: 01/31/2015 NET WAGES PAID FOR WEEK (6) Rev. Dec. 2008 GS11P14MKC0010 & G14.312 DEDUCTIONS TOTAL PROJECT OR CONTRACT NO. OTHER (8) DEDUCTIONS no work no work no work no work WITH-HOLDING TAX 101 Wall St Rockville MD 20850 FICA GROSS AMOUNT EARNED 8 PROJECT AND LOCATION 15.84 Switzer HHS RATE OF PAY 15.84 15.84 15.84 (9) 15.84 ADDRESS TOTAL (2) 12 14 15 (c 17 (8 19 work work work no work o work (4) DAY AND DATE 0 nd 2 Elam Maintenance Services 4-19-15 TS 90 ,TO 0 0 SUDC2009-003 05/19/2008 S SUDC2009-003 05/19/2009 s SUDC2009-003 05/19/2009 | S 0 S S 0 S 0 FOR WEEK ENDING SUDC2009-003 05/19/2009 SUDC2009-003 05/19/2009 common laborer common laborer common laborer common laborer common laborer CLASSIFICATION WORK (3) OR SUBCONTRACTOR X NO. OF WITHHOLDING EXEMPTIONS (2) NAME AND INDIVIDUAL IDENTIFYING NUMBER (e.g., LAST FOUR DIGITS OF SOCIAL SECURITY 6626 Adrian St. Hyattsville, MD 20784 [construction clean partners] 404 Blue Silk T2 Gaithersburgh, MD 20877 920 Frederick St. #30. Arlington, VA 22204 1344 Spring Hill Rd. McLean VA 22102 101 Wall Street Rockville MD 20850 NUMBER) OF WORKER vejay Roxburgh-<mark>(b) (6</mark> NAME OF CONTRACTOR David Murray (0) (6 Ξ Vincent Murray flor Benavides-Jesus Meija-PAYROLL NO.

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week," U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(3)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fininge benefits.

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Public Burden Statement

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david murray owner	X = Each laborer or machanic list	Y = Earth laboreer or manhanic listed in the above referenced assumed than been being
(Name of Signatory Party) (Title)	as indicated on the payroll, ar	cachiaborer of inscrianc listed in the above referenced payroll flas been pald, as indicated on the payroll, an amount not less than the sum of the applicable
do hereby state:	basic hourly wage rate plus the amount of the required in the contract, except as noted in section 4(x) below	basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in section d(c) below
(1) That I pay or supervise the payment of the persons employed by		
Elam Maintenance Services	(c) EXCEPTIONS	
(Contractor or Subcontractor)	INE EXCEPTION (CRAFT)	EXPLANATION
Switzer HHS ; that during the payroll period commencing on the		
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3 (29 C.F.R. Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Start. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145), and described below:	. 948,	
	I	
	REMARKS:	
(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.	the ications	

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

6/15/2015

Date

EXCEPTION (CRAFT)	EXPLANATION
REMARKS:	
NAME AND TITLE	SIGNATURE

owner David Murray

in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe bene fits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in section 4(c) below.

program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That: (a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship

SIGNATURE

THE WILLFUL. FALSHFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.

Wage and Hour Division

(For Contractor's Optional Use; See Instructions at www.dol.gov/whd/forms/wh347instr.htm)

Parsons are not required to respond to the collection of information unless it displays a currently valid OMB control number

U.S. Wage and Hour Division Rev. Dec. 2008

\$413.49 OMB No.: 1235-0008 Expires: 01/31/2015 \$413.49 \$413.49 \$413.49 NET WAGES PAID FOR WEEK \$413.49 GS11P14MKC0010 & G14.312 \$413.49 \$413.49 6) TOTAL 45.87 45.87 45.87 45.87 45.87 45.87 45.87 PROJECT OR CONTRACT NO. OTHER (8) DEDUCTIONS 12.98 Washington dc WITH-HOLDING TAX 12.98 12.98 12.98 12.98 12.98 12.98 101 Wall St Rockville MD 20850 32.89 32.89 32.89 32.89 32.89 32.89 32.89 FICA 459.36 459.36 459.36 459.36 459.36 459.36 459.36 459.38 GROSS AMOUNT EARNED 459.36 459.36 459.36 459.38 459.36 459.36 E PROJECT AND LOCATION Swilzer HHS 15.84 15.84 RATE OF PAY 15.84 15.84 15.84 15.84 9 15.84 ADDRESS TOTAL. HOURS 29 29 29 29 29 29 (2) 29 12 OURS WORKED EACH DAY Sat 6 (4) DAY AND DATE ∞ 8 8 8 8 ω 8 ģ 8 thur ω 8 8 8 ∞ Elam Maintenance Services 8 9 ဖ 9 9 9 0 9 ر اب 7 lues -1 1 1 ~ ПОП 6 4/12/15 JS 20 JO 0 တ w 0 to 0 B SUDC2009-003 05/19/2009 FOR WEEK ENDING SUDC2009-003 05/19/2009 SUDC2009-003 05/19/2009 SUDC2009.003 05/19/2009 SUDC2009-003 05/19/2009 SUDC2009-003 05/19/2009 SUDC2009-003 05/19/2009 common laborer WORK CLASSIFICATION 3 \boxtimes NO, OF EXEMPTIONS OR SUBCONTRACTOR (3) NAME AND INDMIDUAL IDENTIFYING NUMBER (8.g., LAST FOUR DIGITS OF SOCIAL, SECURITY construction clean partners JOVAN CRAWFORD-(0) (6) Vincent Murray(D) (G flor Benavides.(D) (6 ~ vejay Roxburgh-8(b) (6 Ξ NAME OF CONTRACTOR Issac Jesse Reid David Murray-Jesus Meija PAYROLL NO.

29 C.F.R. § 5.5(e)(3)(ii) require contractors to submit weekly a copy of all payrolis to the Federal agency contracting for or financing the construction project, accompanied by a signed 'Statement of Compilance' Indicating that the payrolis are correct and contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits. White completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weakly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at

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Public Burden Statement

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Date4/1:7/15	AN WHEDE CONNOT DENICEITS ADE DAIN IN CACH	MOACH
James Pinch	(b) where things benefit of the trop	
lane of Signatory Party)	as indicated on the payroll,	Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable hasir hourty was rate also also the amount of the consisted fines basefile as listed.
do hereby stale:	in the contract, except as r	page though wayer rate plus the annount of the required things benefits as listed. In the contract, except as noted in section 4(c) below.
(1) That I pay or supervise the payment of the persons employed by	(c) EXCEPTIONS	
Cantractor or Subcontractor) Mary E. Switzer Building in Washington, DC . that during the payonal partied commencing on the	EXCEPTION (CRAFT)	EXPLANATION
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said project have be er directly or Indirec		
Elam Maintenance Services		
(Contractor or Subcontractor)		
weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 C.F.R. Subtille A), Issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 946, 63 Stat. 108, 72 Stat. 957, 76 Stat. 357; 40 U.S.C. § 3145), and described below:		
	REMARKS:	
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(4) That: (a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS	NAME AND TITLE	SIGNATUPE
n addition to the basic hourly wage rates paid to each laborer or mechanic listed in	David Murray owner	(a) (a)
the above referenced payroll, payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in section d(s) below:	THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE ST SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. 31 OF THE UNITED STATES CODE.	THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION, SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.
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Wages Paid Form Approved Budget Bureau No. 44-R1093 Deductions Total Other FPI Project # / Contract Number Union DEDUCTIONS State 14213 With-Holding With-Holding Tax (For Contractor's Optional Use; See Instruction, Form WII-347 Inst.) 1658 Village Green, Crofton, MD 21114 FICA Gross Amount Earned Rate of Pay Switzer Building HHS **PAYROLL** Hours Total Project and Location DAY AND DATE

O S S M T W Th F

S 19 20 21 22 23 24 25 Address Fain-Padgett Insulation, Inc. 09-25-15 Name of Subcontractor Classification For Week Ending NO HOURS WORKED!! Work No. of W/H W.E. Bowers Name, Address and Social Security Number U.S. Department of Labor Wage and Hour Division Name of Contractor of Employee Payroll Number

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120	
9/30/2015	
Date	

. Taylor		200000000000000000000000000000000000000
Heather L	state:	
	do hereby state:	
	g	

- incorporated into the contract; that the classifications set forth therein than the applicable wage rates contained in any wage determination wage rates for laborers or mechanics contained therein are not less submitted for the above period are correct and complete; that the (2) That any payrolls otherwise under this contract required to be for each laborer or mechanic conform with the work performed
- if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Apprenticeship and Training, United States Department of Labor, or registered in a bona fide apprenticeship program registered with a (3) That any apprentices employed in the above period are duly State Apprenticeship Agency recognized by the Bureau of Labor.
- (4) That:
- Where fringe benefits are paid to approved plans, funds or programs: (a)
- In addition to the basic hourly wage rates paid to each ×

laborer or mechanic listed in the above referenced payroll, payments

to appropriate programs for the benefit of such employees, except as of fringe benefits as listed in the contract have been or will be made noted in Section 4(c) below.

Where fringe benefits are paid in cash: (Q)

sum of the applicable basic hourly wage rate plus the amount of the Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the required fringe benefits listed in the contract, except as noted in Section 4(c) below.

Exceptions: 9

Exception	Explanation
Remarks	

(9) (q)	Signature	
Payroll Administrator	Name and Title	

the subcontractor to civil or criminal prosecution, see section 1001 of the Title 18 and The wilful falsification of any of the above statements may subject the contractor or Section 231 of the Title 31 of the United States Code.

Wage and Hour Division

PAYROLL (For Contractor's Optional Use; See Instruction, Form WII-347 Inst.)

Budget Bureau No. 44-R1093 Form Approved

		Net	Wages	Paid for Week									***************************************		
				Deduct- ions fc					 		•				
	Number			Other											
	FPI Project # / Contract Number 14213	TIONS		Union											
	FPI Project	DEDUCTIONS	State	With- Holding										***************************************	
1114			With-	Holding Tax		······································				 					
n. MD 2				FICA		·		7						-	
lss 1658 Village Green, Crofton, MD 21114		Gross	Amount	Earned											
ge Gree	HS	Rate	of Pay												
58 Villa	cation	Total	Hours												
Address 16	Project and Location Switzer Building HHS	TE		6 17 18											***************************************
<u> </u>		AND	V T M	14 15 16 17											
		-	S	12 13											
ontractor lett Ins	₽ 60			S		<u> </u>									
Name of Subcontractor Fain-Padgett Insulation.	For Week Ending	Work	Classification			NO HOURS WORKED!!									
		Š	ğ	M/H	 	JURS 1									
Name of Contractor W.E. Bowers	Payroll Number	Name, Address and	Social Security Number	of Employee		NO HC	J.A.								

Date	9/18/2015	1
	I, Heather L. Taylor	Payroll Administra
do hereby state:	y state:	
1) That r	(1) That no persons were employed by	
ain-Padg	Fain-Padgett Insulation, Inc. on	Switzer Building H
during the	during the payroll period commencing on the 12th	12th day o
September	r 2015, and ending the 18th	
September	r 2015, all persons employed on said proje	loyed on said proj
ave beer	paid the full w	hat no rebates have
een or wi	been or will be made either directly or indirectly to or on behalf of s	to or on behalf of
ain-Padg	Fain-Padgett Insulation, Inc. from the full weekly wages earned by	y wages earned by
nd that n	and that no deductions have been made either directly or indirectly	directly or indirectl

er Building HHS

day of day of

oll Administrator

incorporated into the contract; that the classifications set forth therein wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination submitted for the above period are correct and complete; that the That any payrolls otherwise under this contract required to be for each laborer or mechanic conform with the work performed. (2)

if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Apprenticeship and Training, United States Department of Labor, or registered in a bona fide apprenticeship program registered with a (3) That any apprentices employed in the above period are duly State Apprenticeship Agency recognized by the Bureau of Labor.

(4) That:

Where fringe benefits are paid to approved plans, funds or programs: (a)

In addition to the basic hourly wage rates paid to each ×

laborer or mechanic listed in the above referenced payroll, payments

to appropriate programs for the benefit of such employees, except as of fringe benefits as listed in the contract have been or will be made noted in Section 4(c) below.

Where fringe benefits are paid in cash: **a**

sum of the applicable basic hourly wage rate plus the amount of the Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the required fringe benefits listed in the contract, except as noted in Section 4(c) below.

es earned by any

on behalf of said

rebates have

on said project

Exceptions: 9

amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 357, 40 U.S.C. 276c), and

described below:

from the full wages earned by any person, other than permissible

deductions as defined in Regulations, Part 3 (29 CFR Subtitle A),

ssued by the Secretary of Labor under the Copeland Act, as

Exception	Explanation
Remarks	

Payroll Administrator

the subcontractor to civil or criminal prosecution, see section 1001 of the Title 18 and The wilful falsification of any of the above statements may subject the contractor or Section 231 of the Title 31 of the United States Code.

Wage and Hour Division

PAYROLI

(For Contractor's Optional Use; See Instructions at www.dol.gov/whd/forms/wh347instr.htm)

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Self-may a	.S. Wage and Hour Division	Rev. Dec. 2008
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	Way	
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Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number.

OMB No.: 1235-0008 Expires: 01/31/2015 NET WAGES PAID FOR WEEK 6) TOTAL PROJECT OR CONTRACT NO. OTHER 10232834 UNION (8) DEDUCTIONS STATE WITH-HOLDING TAX ADDRESS 7525 Connelley Drive, Unit U Hanover, MD 21076 FICA GROSS AMOUNT EARNED Switzer HHS Consolidation 8 PROJECT AND LOCATION RATE OF PAY 9 TOTAL (2) 20 S 19 PA S (4) DAY AND DATE 18 [L 17 ≥ 91 09/95/2015 15 Sub-work for: Singleton Electric Z 14 .T2 R0 .T0 0 0 0 S 0 Ø 0 co υŋ 0 0 O 0 FOR WEEK ENDING WORK CLASSIFICATION (3) OR SUBCONTRACTOR NO, OF WITHHOLDING EXEMPTIONS (5) G&M Services, LLC NAME AND INDIVIDUAL IDENTIFYING NUMBER (e.g., LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER) OF WORKER NO WORK DONE NAME OF CONTRACTOR Ξ 35 PAYROLL NO.

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors performing work on Federally financed or assisted construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer nection is the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

Public Burden Statement

We estimate that is will take an average of 55 minutes to complete this collection, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and reviewing the collection of information. If you have any comments regarding these estimates or any other aspect of this collection, including suggestions for reducing this burden, send them to the Administrator, Wage and Hour Division, U.S. Department of Labor, Room S3502, 200 Constitution Avenue, N.W. Washington, D.C. 20210

Date C C C C C C C C C C C C C C C C C C C		(b) WHERE FRINGE BENEFITS ARE PAID IN CASH	
Valencia Payne	Accounts Receivables Clerk	see becaused and at the best of the best o	
(Name of Signatory Party)	(Title)	as indicated on the payroll, an amount not less than the sum of the applicable	yroll has been paid n of the applicable
do hereby state:		basic hourly wage rate plus the amount of the required fringe benefits as lister in the contract, except as noted in section 4(c) below.	e benefits as liste
	sons employed by	(c) EXCEPTIONS	
G&M Services, LLC Sub-wor	Sub-work for: Singleton Electric		
(Contractor or Subcontractor)		EXCEPTION (CRAFT) EXPLANATION	NO
Switzer HHS Consolidation	; that during the payroll period commencing on the		
(Building or Work)	20 day of		
ect have be ly or indirec	e full weekly wages earned, that no rebates have		
G&M Services, LLC Sub-work for: Singleton Electric	for: Singleton Electric		
(Contractor or Subcontractor)			
weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 C.F.R. Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 946 63 Start. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145), and described below:	weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 C.F.R. Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Start. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145), and described below:		
National Pension Fund	\$1.70 per hr.		
Steamfitters Local 602	9.90 per hr.		
Plumbers Local 5	9.76 per hr.		
Unskilled Labor	7.71 per hr.	REMARKS:	

9 / 23 / 2015

Date

1

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed. (3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

- (a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS
- in addition to the basic hourly wage rates paid to each laborer or mechanic listed in
 the above referenced payroll, payments of finge bene fits as listed in the contract
 have been or will be made to appropriate programs for the benefit of such employees,
 except as noted in section 4(c) below. >

REMARKS:	
NO WORK DONE	
(9) (q)	
NAME AND TITLE	Г
Valencia Payne	
Accounts Receivables Clerk	
THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STAT SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SE 31 OF THE UNITED STATES CODE.	ш

CONTRACTOR'S WEEKLY PAYROLL STATEMENT						
PAYROLL NUMBER	PAYROLL DATE	GROSS AMOUNT				
49	September 27, 2015	\$1,981.20				

I, Dorothy Root, Certified Payroll Department, do hereby state:

1) That I pay or supervise the payment of the persons employed by GRUNLEY CONSTRUCTION CO., INC. on Contract Number GS11P14MKC0010 at the SWITZER HHSC (14-0312-1400), Washington, D.C. payroll period commencing on the 21st day of September 2015 and ending on the 27th day of September 2015, all persons employed on the said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on the behalf of said GRUNLEY CONSTRUCTION CO., INC., from the full weekly wages earned by any person, and that no deductions have been made or will be made, either directly or indirectly, from the weekly wages earned by any person, other than permissible deductions, as defined in the Regulations under the Copeland (Anti-Kickback) Act (40 U.S. C. 276(c) as amended) and described below.

"See payroll attached and referenced above, which is incorporated in and made a part of this statement."

- 2) That the payrolls submitted for the above period are correct and complete; that the wage rates for laborers and mechanics contained therein are not less than the minimum wage rates shown in the contract; and that the classifications therein set forth for each laborer and mechanic conform with the work he performed.
- 3) That all apprentices employed on the contract during the above payroll period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Federal Committee on Apprenticeship, U.S. Department of Labor, or if no such recognized agency exist in a State, are registered with the Bureau of Apprenticeship, U.S. Department of Labor.
 - 4) That:
 - (a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

In addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in Section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

Each Laborer or mechanic listed in the above referenced payroll has been paid as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4(c) below.

(c) EXCEPTIONS

EXCEPTION (CRAFT)	EXPLANATION
NAME AND TITLE	SIGNATURE
Dorothy Root, Accounting Supervisor	(b) (6)

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE

10-01-2015

Certified Payroll Report

09-27-15

For the Period Ending:

SWITZER HHSC Job: 14-0312-1400

WASHINGTON, DC

<u>Net</u> 862.16	Net 652.03	Net 1,514.19
Total FWH SWH Other Gross FICA SUI/SDI Deducts ,102.40 65.12 44.69 46.10 84.33 84.33	Total FWH SWH Other Gross FICA SUI/SDI Deducts 378.80 58.78 53.09 49.44 65.46 45.44	Total Gross 1,981.20 FWH 123.90 FICA 149.79 SWH 97.78 SDI .00 Other 95.54
Gross This Job 1,102.40	Gross This Job 878.80 878.80	Gross <u>This Job</u> 1,981.20
Cash Hrly Rate Fringe Fringe 27.56	Cash Hrly Rate Fringe Fringe	
09-27 Total Sun Hours 40.00	99-27 Total Sun Hours 40.00	5 Total X Hours 0 80.00
9-25 09-26 <u>Fri</u> <u>Sat</u> 8.00	9-25 09-26 <u>Fri</u> Sat 8.00	6-15 09-27-15 rday Sunday .00 .00
9-23 09-24 0 Wed Thu 8.00 8.00	9-23 09-24 (Wed Thu 8.00 8.00	09-25-15 09-26-15 Friday Saturday 16.00 .00
09-21 09-22 09-23 09-24 0 Mon Tue Wed Thu 8.00 8.00 8.00	09-21 09-22 09-23 09-24 0 Mon Tue Wed Thu 8.00 8.00 8.00	5 09-24-15 (<u>Thursday</u> 0 16.00
RONNIE ASHTON (D) (G) Black Male M - 5 CARPENTER Reg	MILACRO DE JESUS GUERRA (b) (6) Hispanic Feml M - ZUNSKILLED LABORE Reg	Totals for SWITZER HHSC 09-21-15 09-22-15 09-23-15 09-24-15 Monday Tuesday Wednesdy Thursday 16.00 16.00 16.00

Page 24

09-27-2015		Amount	361.60	361.60	26.36 102.96	129.32
For the Period Ending:		Fringe ID	UNION FRNG		401-K MCH HOSP - S	1
-1400 SWITZER HHSC	WASHINGTON DC	Employee Name	RONNIE ASHTON		MILAGRO DE JESUS GUERRA	
Job: 14-0312-1400	Λ	Employee	ASH04		GUE01	

CONTRACTOR'S WEEKLY PAYROLL STATEMENT						
PAYROLL NUMBER	PAYROLL DATE	GROSS AMOUNT				
47	September 20, 2015	\$3,138.10				

- I, Dorothy Root, Certified Payroll Department, do hereby state:
- 1) That I pay or supervise the payment of the persons employed by GRUNLEY CONSTRUCTION CO., INC. on Contract Number GS11P14MKC0010 at the SWITZER HHSC (14-0312-1400), Washington, D.C. payroll period commencing on the 14th day of September 2015 and ending on the 20th day of September 2015, all persons employed on the said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on the behalf of said GRUNLEY CONSTRUCTION CO., INC., from the full weekly wages earned by any person, and that no deductions have been made or will be made, either directly or indirectly, from the weekly wages earned by any person, other than permissible deductions, as defined in the Regulations under the Copeland (Anti-Kickback) Act (40 U.S. C. 276(c) as amended) and described below.

"See payroll attached and referenced above, which is incorporated in and made a part of this statement."

- 2) That the payrolls submitted for the above period are correct and complete; that the wage rates for laborers and mechanics contained therein are not less than the minimum wage rates shown in the contract; and that the classifications therein set forth for each laborer and mechanic conform with the work he performed.
- 3) That all apprentices employed on the contract during the above payroll period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Federal Committee on Apprenticeship, U.S. Department of Labor, or if no such recognized agency exist in a State, are registered with the Bureau of Apprenticeship, U.S. Department of Labor.
 - 4) That:
 - (a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

In addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in Section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH Each Laborer or mechanic listed in the above referenced payroll has been paid as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4(c) below.

(c) EXCEPTIONS

EXCEPTION (CRAFT)	EXPLANATION
NAME AND TITLE	SIGNATURE
Dorothy Root, Accounting Supervisor	(b) (6)

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE

09-22-2015

Certified Payroll Report

SWITZER HHSC Job: 14-0312-1400

WASHINGTON, DC

For the Period Ending:

09-20-15

Net 862.16	Net 652.03	<u>Net</u> 919.35	<u>Net</u> 1,091.32	3,524.86
Total FWH SWH Other Gross FICA SUI/SDI Deducts ,102.40 65.12 44.69 46.10 84.33 43.64 46.10	Total FWH SWH Other Gross FICA SUI/SDI Deducts 878.80 58.78 53.09 49.44 65.46 65.46	Total FWH SWH Other Gross FICA SUI/SDI Deducts ,348.26 126.16 58.00 146.64 98.11 98.11	Total FWH SWH Other Gross FICA SUI/SDI Deducts 400.32 132.88 69.00 107.12	Total Beductions 4,729.78 FWH 382.94 FICA 355.02 SWH 224.78 SDI .00 Other 242.18
Gross This Job 1,102.40 1,1102.40	Gross This Job 8 878.80 8	Gross This Job 552.42 1,3	Gross This Job 604.48 604.48	Gross <u>This Job</u> 3,138.10
Cash Hrly Rate Fringe Fringe 27.56	Cash Hrly Rate Fringe Fringe 21.97	Cash Hrly Rate Fringe Fringe 33.16 1.37 3.25	Cash Hrly Rate Fringe Fringe 33.16 4.62	
99-20 Total Sun Hours 1 40.00 2	99-20 Total Sun Hours F 40.00 2	99-20 Total Sun Hours F 16.00 3	09-20 Total Sun Hours 16.00 3	Total Hours 112.00
09-19 Sat	09-19 Sat	7 09-18 09-19 0 Fri Sat	09-19 Sat	9-15 09-20-15 day Sunday .00
9-16 09-17 0 Wed Thu 8.00 8.00	9-16 09-17 0 Wed Thu 8.00 8.00	9-16 09-17 0 Wed Thu	9-16 09-17 0 Wed Thu	09-18-15 09-19-15 <u>Friday Saturday</u> 16.00 .00
Mon Tue Wed Thu Fri 8.00 8.00 8.00 8.00 8.00	Mon Tue Wed Thu Fri 8.00 8.00 8.00 8.00 8.00	Mon Tue Wed Thu 8.00 8.00	09-14 09-15 09-16 09-17 09-18 Mon Tue Wed Thu Fri 8.00 8.00	
RONNIE ASHTON (b) (c) Black Male M - 5 CARPENTER Reg	MILAGRO DE JESUS GUERRA (b) (c) Hispanic Feml M - ZUNSKILLED LABORE Reg	RICKY CORTEZ SILVER O (6) Black M - 1 BRICKLAYER Reg	HARVEY RAY SILVER (b) (6) Black Male M - 3 BRICKLAYER Reg	Totals for SWITZER HHSC 09-14-15 09-15-15 09-16-15 09-17-15 Monday Tuesday Wednesdy Ihursday 32.00 32.00 16.00 16.00

GRUNLEY CONSTRUCTION CO, INC.

09-20-2015		Amount	361.60	361.60	26.36 102.96	129.32	16.57 36.75
od Ending:		An					
For the Period Ending:		Fringe ID	UNION FRNG		401-K MCH HOSP - S		401-K MCH HOSP - S
SWITZER HHSC	DC	ø.	NC		MILAGRO DE JESUS GUERRA		z SILVER
14-0312-1400 Si	WASHINGTON	Employee Name	RONNIE ASHTON		MILAGRO DE JI		RICKY CORTEZ SILVER
Job: 14-031		Employee	ASH04		GUE01		SIL02

53.32

CONTRACTOR'S WEEKLY PAYROLL STATEMENT						
PAYROLL NUMBER	PAYROLL DATE	GROSS AMOUNT				
50	October 4, 2015	\$2,023.00				

- I, Dorothy Root, Certified Payroll Department, do hereby state:
- 1) That I pay or supervise the payment of the persons employed by GRUNLEY CONSTRUCTION CO., INC. on Contract Number GS11P14MKC0010 at the SWITZER HHSC (14-0312-1400), Washington, D.C. payroll period commencing on the 28th day of September 2015 and ending on the 4th day of October 2015, all persons employed on the said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on the behalf of said GRUNLEY CONSTRUCTION CO., INC., from the full weekly wages earned by any person, and that no deductions have been made or will be made, either directly or indirectly, from the weekly wages earned by any person, other than permissible deductions, as defined in the Regulations under the Copeland (Anti-Kickback) Act (40 U.S. C. 276(c) as amended) and described below.

"See payroll attached and referenced above, which is incorporated in and made a part of this statement."

- 2) That the payrolls submitted for the above period are correct and complete; that the wage rates for laborers and mechanics contained therein are not less than the minimum wage rates shown in the contract; and that the classifications therein set forth for each laborer and mechanic conform with the work he performed.
- 3) That all apprentices employed on the contract during the above payroll period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Federal Committee on Apprenticeship, U.S. Department of Labor, or if no such recognized agency exist in a State, are registered with the Bureau of Apprenticeship, U.S. Department of Labor.
 - 4) That:
 - (a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

In addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in Section 4(c) below.

- (b) WHERE FRINGE BENEFITS ARE PAID IN CASH Each Laborer or mechanic listed in the above referenced payroll has been paid as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4(c) below.
- (c) EXCEPTIONS

EXCEPTION (CRAFT)	EXPLANATION
NAME AND TITLE	SIGNATURE
Dorothy Root, Accounting Supervisor	(b) (6)

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE

Certified Payroll Report

Job: 14-0312-1400 SWITZER HHSC

WASHINGTON, DC

For the Period Ending:

10-04-15

Net 862.16	Net 828.89	<u>Net</u> 864.01	<u>Net</u> 2,555.06
Other Deducts 46.10	Other Deducts 57.35	Other Deducts 137.77	ions 6.27 2.38 8.86 00
SWH SUI/SDI 44.69	SWH SUI/SDI 73.42	SWH SUI/SDI 70.75	Deductions 356.27 272.38 4 188.86 .00 241.22
FWH FICA 65.12 84.33	FWH FICA 97.14 85.64	FWH FICA 194.01 102.41	tal SSS 7.79 FWH FICA SWH SDI Other
Total Gross 1,102.40	Total Gross 1,142.44	Total Gross 1,368.95	Total <u>Gross</u> 3,613.79
Gross This Job 1,102.40 1,102.40	Gross This Job 878.80 878.80	Gross This Job 41.80	Gross This Job 2,023.00
Hrly <u>Fringe</u>	Hrly Fringe	Hrly Fringe	
Cash <u>Fringe</u>	Cash Fringe	Cash Fringe	
Rate 27.56	Rate 21.97	<u>Rate</u> 20.90	
Total Hours 40.00	Total Hours 40.00	Total Hours 2.00	Total Hours 82.00
10-04 Sun	10-04 Sun	10-04 Sun	
10-03 Sat	10-03 Sat	10-03 Sat	10-04-15 Sunday .00
10-02 Fri 0 8.00	10-02 Fri 0 8.00	10-02 Fri	10-03-15 <u>Saturday</u> .00
10-01 Thu 8.00	10-01 Thu 8.00	10-01 Thu	5 10-
09-28 09-29 09-30 10-01 <u>Mon Tue Wed Thu</u> 8.00 8.00 8.00 8.00	Mon Tue Wed Thu 8.00 8.00 8.00 8.00	Mon Tue Wed Thu 2.00	10-02-1 Fride 16.0
09-29 Tue 8.00	09-29 Tue 8.00	09-29 Tue 2.00	01-15 rsday 16.00
09-28 Mon 8.00	09-28 Mon 8.00	09-28 Mon	15 10- dy <u>Thu</u>
Male IR Reg	ERRA Femi E Reg	Male E Reg	HSC 09-30- <u>Wednes</u> 16.
TON Black Male CARPENTER Reg	SUS GU spanic) LABOF	JACKSON Black ED LABOR	SWITZER HHSC 09-29-15 09-30-15 10-01-15 10-02-15 Tuesday Wednesdy Thursday Friday 5 18.00 16.00 16.00
SHTOI	DE JE: HE: KILLEC	MILLEE	S 본 글
RONNIE ASHTON (b) (6) Bla MI - 3 CAR	MILAGRO DE JESUS GUERRA (b) (6) Hispanic Femi M - ZJNSKILLED LABORE Reg	ADAM SHAWN JACKSON (b) (6) Black Male S - ZJNSKILLED LABORE Reg	Totals for Si 09-28-15 <u>Monday</u> 16.00

10-04-2015		Amount	361.60	361.60	26.35 79.20	105.55	1.25 3.15
For the Period Ending:		Fringe ID	UNION FRNG	I	401-K MCH HOSP - S	1	401-K MCH HOSP - S
14-0312-1400 SWITZER HHSC	WASHINGTON DC	Employee Name	RONNIE ASHTON		MILAGRO DE JESUS GUERRA		ADAM SHAWN JACKSON
Job: 14-03		Employee	ASH04		GUE01		JAC02

4.40

Singleton Electric Company, Inc. Statement of Compliance Wage and Hours Report

CP# 49

Job# 1419

Week Ending: 9/27/2015

Contract# **GS-11P-14-MKC-0010** 15020 Shady Grove Rd #500 To: Grunley Construction Co. Rockville, MD 20850 **Switzer HHS Consolidation** Washington, DC 20230 330 C St SW Job# 1419 Project: Singleton Electric Company, Inc. Gaithersburg, MD 20879 7860 Cessna Ave. Employer:

FOR THE PAY PERIOD BEGINNING 9/21/2015 AND ENDING 9/27/2015 I, Erin Weidemann, Assistant do hereby state:

above. All persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor on behalf of said Singleton Electric Co., Inc. from the full weekly wages earned by Electric Co., Inc. on the above referenced project, during the time period shown from the full wages earned by any person, other than permissible deductions as any person, and that no deductions have been made either directly or indirectly 1) That I pay or supervise the payment of persons employed by Singleton under the Copeland Act, and all subsequent amendments.

2) That any paryolls otherwise under this contract required to be submitted for mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications the above period are correct and complete; that the wage rates for laborers or set forth therein for each laborer or mechanic conform with the work he/she 3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency Department of Labor, or, if no such agency exists in a State, are registered with he Bueau of Apprenticeship and Training, United States Department of Labor. recognized by the Bureau of Apprenticeship and Training, United States

FUNDS, OR PROGRAMS in addition to the basic hourly wage rates paid to each aborer or mechanic listed in the above referenced payroll, payments of fringe 4) That (a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, no exceptions.

The willful falsification of any of the above statements may subject the contractor or subcontractor to civil or criminal prosecution. See Section 1001 of Title 18 and Section 231 of Title 31 of the United States Code.

Remarks: Fringe benefits for Union members are paid to applicable unions for Health /Welfare, Retirement, Apprenticeship Training, etc. Miscellaneous deductions include union dues and garnishments.

Name and Title:

Signature:



Erin Weidemann, Assistant

Singleton Electric Company, Inc. Wage and Hours Report Statement of Compliance

CP# 40

Week Ending: 9/27/2015

		Mon	Tues	Wed	Thurs	Ë	Sat	Sun	Tot Hrs	Wage Rate	Fringe. Rate	Job. Gross Pay	Gross Pay	FWH	MED	State WH	Misc Deducts	Net Pay
DOLL0 Dolan;Lawrence	IBEW	:W 26	AA -03	33														
	REG	0.0	8.0	0.0	0.0	8.0	0.0	0.0	16.0	21.40	9.60	342.40			4.96			
Apprentice 50%	TO	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.00	0.00	0.00	342.40	14.43	21.23	14.38	3.42	283.98
		Mon	Tues	Wed	Thurs	Ë	Sat	Sun	Tot Hrs.	Wage Rate	Fringe Rate	Job Gross Pay	Gross Pay	FWH	MED	State WH	Misc Deducts	Net Pay
HARM1 Harrigan; Michael Wayne	ie IBEW	W 26	JA -04.1	1.4														
	REG	8.0	8.0	0.0	0.0	8.0	0.0	0.0	24.0	43.80	15.47	1,051.20			25.41	·=	9	
Journeyman Electrician	6	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.00	0.00	0.00	1,752.00	346.05	108.62	136.23	37.04	1,098.65
		Mon	Tues	Wed	Thurs	Ë	Sat	Sun	Tot Hrs	Wage Rate	Fringe Rate	Job Gross Pay	Gross Pay	FWH	MED	State WH	Misc Deducts	Net Pay
MCCJ0 McCoy;Justin Allen	IBEW	W 26	JA -04	40					1									
	REG	8.0	8.0	0.0	0.0	8.0	0.0	0.0	24.0	42.80	15.44	1,027.20			24.82	::31		
Journeyman Electrician	ТО	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.00	0.00	00.00	1,712.00	278.36	106.15	114.00	289.51	899.16
	-	Mon	Tues	Wed	Thurs	Fri	Sat	Sun	Tot Hrs.	Wage Rate	Fringe Rate	Job Gross Pay	Gross Pay	FWH	MED	State WH	Misc	Net Pay
POLJ0 Polk;James Clayton	IBE	IBEW 26	JA -01	7					,									
Electrical Supervisor	REG OT	2.0	0.0	0.0	0.0	0.0	0.0	0.0	2.0	70.00	16.26	140.00	2,800.00	477.64	40.60	201.96	56.00	1,850.20
		Mon	Tues	Wed	Thurs	Ë	Sat	Sun	Tot Hrs	Wage Rate	Fringe	Job Gross Pay	Gross Pay	FWH	MED	State WH	Misc	Net Pay
ROBM0 Robinson; Michael Vaughn	ghn IBEW	:W 26	JA -02.4	12.4														
Electrical Foreman	REG	8.0	8.0	8.0	8.0	8.0	0.0	0.0	40.0	46.80	15.56	1,872.00	187200	356 99		120 53	37 44	1 247 25
									5				1			i		77.17.7.
				Job	Job Totals:			:	106.0			4,432.80						
)	0.0			0.00						

Singleton Electric Company, Inc. Statement of Compliance Wage and Hours Report

CP# 48

Week Ending: 9/20/2015

Switzer HHS Consolidation Washington, DC 20230 330 C St SW Singleton Electric Company, Inc. Gaithersburg, MD 20879 7860 Cessna Ave. Employer:

Job# 1419

To: Grunley Construction Co. 15020 Shady Grove Rd #500

Rockville, MD 20850

Contract# **GS-11P-14-MKC-0010**

FOR THE PAY PERIOD BEGINNING 9/14/2015 AND ENDING 9/20/2015 I, Erin Weidemann, Controller do hereby state:

above. All persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor on behalf of said Singleton Electric Co., Inc. from the full weekly wages earned by Electric Co., Inc. on the above referenced project, during the time period shown from the full wages earned by any person, other than permissible deductions as any person, and that no deductions have been made either directly or indirectly 1) That I pay or supervise the payment of persons employed by Singleton under the Copeland Act, and all subsequent amendments.

- 2) That any paryolls otherwise under this contract required to be submitted for mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications the above period are correct and complete; that the wage rates for laborers or set forth therein for each laborer or mechanic conform with the work he/she
- 3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency Department of Labor, or, if no such agency exists in a State, are registered with the Bueau of Apprenticeship and Training, United States Department of Labor. recognized by the Bureau of Apprenticeship and Training, United States
- FUNDS, OR PROGRAMS in addition to the basic hourly wage rates paid to each aborer or mechanic listed in the above referenced payroll, payments of fringe 4) That (a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, no exceptions.

The willful falsification of any of the above statements may subject the contractor or subcontractor to civil or criminal prosecution. See Section 1001 of Title 18 and Section 231 of Title 31 of the United States Code.

Remarks: Fringe benefits for Union members are paid to applicable unions for Health /Welfare, Retirement, Apprenticeship Training, etc. Miscellaneous deductions include union dues and garnishments.

Name and Title:

Signature:



Erin Weidemann, Controller

Week Ending: 9/20/2015

Singleton Electric Company, Inc. Wage and Hours Report Statement of Compliance

CP# **48**

						000			0.0									
						4,186.10			114.0			S:	Job Totals:	은				
1,315.69	26.55	91.45	109.74	200.91	1,770.00	0.00				0.0		0 0	0.0	0.0	0.0		OT	Communication Installer
			25.66			88.50	9.21	44.25	2.0		0.0	-		3	,		REG	
											*			60-	26 TT -09	IBEW 2	Ш	SHOD0 Shortt;Derek Roy
Net Pay	Misc Deducts	State WH	MED	FWH	Gross Pay	Job Gross Pay	Fringe Rate	Wage Rate	Tot Hrs	Sun	Sat	Fri	Thurs	Wed	Tues	Mon		
1,204.83	37.44	129.53	116.07	356.99	1,872.00	0.00	0.00	0.00	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	ОТ	Electrical Foreman
			27.14		-	1,872.00	_	4	4								REG	
ACONTAINMENT/INSPIRED SOCIETY						Swalling built continues and								JA -02.4	26 JA		aughn IE	ROBM0 Robinson; Michael Vaughn IBEW
Net Pay	Misc Deducts	State WH	MED FICA	FWH	Gross Pay	Job Gross Pay	Fringe Rate	Wage Rate	Tot Hrs	Sun	Sat	Ë	Thurs	Wed	Tues	Mon		
704.81	282.26	85.00	84.91	192.76	1,369.60	0.00	0.00	0.00	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	OT	Journeyman Electrician
			19.86		٠	1,369.60	15.44	42.80	32.0	0.0	0.0	8.0	8.0	0.0	8.0	8.0	REG	
							ad ad managed with a state of the state of t	ALESSA MANAGEMENT			Company and the second			04	26 JA -04	IBEW 2	=	MCCJ0 McCoy;Justin Allen
Net Pay	Misc Deducts	State WH	MED	FWH	Gross Pay	Job Gross Pay	Fringe Rate	Wage Rate	Tot Hrs	Sun	Sat	Fri	Thurs	Wed	Tues	Mon		
636.92	8.56	55.21	53.07	89.82	856.00	0.00	0.00	0.00	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	OT	Apprentice 50%
		1	12.42		The state of the s	856.00	9.60		40.0	0.0							REG	
						•								-03	26 AA -03	BEW 2	4	DOLL0 Dolan;Lawrence
Net Pay	Misc	State vvn	FICA	LIAAL	GIOSS T By	Gross Pay	Rate	Rate	2 5 -		j	•	2					

Wage and Hour Division

(For Contractor's Optional Use; See Instructions at www.dol.gov/whd/forms/wh347inst.htm)
Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number

U.S. Wage and Hear Drissen

Rev. Dec 2008

WAGES PAID FOR WEEK (6) OMB No.: 1235-0008 Expires: 01/31/2015 TOTAL Union Dues GS-11P-14-MK-C-0010 / SAP# 5000720035 401K PROJECT OR CONTRACT NO: Deductions Insurance WITH-HOLDING TAX MARY SWITZER BUILDING 330 C STREET SOUTH WEST WASHINGTON DC 20001 FICA \$0.00 \$0.00 \$0.00 \$0.00 00.09 \$0.00 GROSS AMOUNT EARNED \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 65 Scott Swamp Road Farmington, CT 06032 RATE OF PAY HOURS TOTAL (5) 8 9 10 11 12 HOURS WORKED EACH DAY PROJECT AND LOCATION: Ŧ DAY AND DATE ≥ Σ 9 S TS 10 TO S 0 S 0 S 0 S 0 S 0 0 9/12/2015 WORK OR SUBCONTRACTOR FOR WEEK ENDING Ξ EXEMPTIONS WITHOLDING NO. OF NAME AND INDIVIDUAL IDENTIFYING NUMBER (e.g., LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER) OF WORKER Stanley Access Technologies LLC NAME OF CONTRACTOR 7 Ξ PAYROLL NO.

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 24.0 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 24.0 U.S.C. § 3145) contractors and subcontractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls to the Federal agency contracting for or financing agencial receiving this information to determine that employees have received legally required wages and fringe benefits. or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencials receiving this information to determine that employees have received legally required wages and fringe benefits.

\$0.00

Public Burden Statement

We estimate that is will take an average of 55 minutes to complete this collection, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. If you have any comments regarding these estimates or any other aspect of this collection, including suggestions for reducing this burden, send them to the Administrator, Wage and Hour Division, ESA, U.S. Department of Labor, Room S3502, 200 Constitution Avenue, N.W.

Washington, D.C. 20210

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Cal

	Elisa Lessano	Principal	LINGUAGE SCHARCE SCHOOL NEST
_	(Name of Signator	y Party)	(Tille)

do hereby state:

(1) That I pay or supervise the payment of the persons employed by

Stanley Access Technologies LLC

; that during the payroll period commencing on the MARY SWITZER BUILDING 330 C STREET SOUTH WEST WASHINGTON DC 20001 (Confractor or Subcontractor)

(Building or Work)

been or will be made either directly or indirectly to or on behalf of said

Stanley Access Technologies LLC

from the full

3 (29 C.F.R. Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part weekly wages earned by any person and that no deductions have been made either directly or indirectly 63 Start. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145), and described below: (Contractor or Subcontractor)

correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the (2) That any payrolls otherwise under this contract required to be submitted for the above period are applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each taborer or mechanic conform with the work he performed.

Apprenticeship and Training, United States Department of Labor, of if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor. apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of (3) That any apprentices employed in the above period are duly registered in a bona fide

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS x - in addition to the basic hourly wage rates paid to each laborer or mechanic listed in

the above referenced payroll, payments of fringe benefits as listed in the contract

have been or will be made to appropriate programs for the benefit of such employees, except as noted in Section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

u - Each laborer or mechanic listed in the above referenced payroll has been paid, basic hourly wage rate plus the amount of the required fringe benefits as listed as indicated on the payroll, an amount not less than the sum of the applicable

in the contract, except as noted in Section 4(c) below.

(c) EXCEPTIONS

EXCEPTION (CRAFT)	EXPLANATION
	*
REMARKS:	

Signature Erika Lessard Customer Financial Services Supervisor

NAME AND TITLE SIGNATURE

SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR

31 OF THE UNITED STATES CODE.



(For Contractor's Optional Use; See Instructions at www.dol.gov/whd/forms/wh347inst.htm)

U.S. Department of Labor Wage and Hour Division

Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number

U.S. When and Hour Division

Rev. Dec 2008

NAME OF CONTRACTOR	OR SUBCONTRACTOR	a Address							OMB No.: 1235-0008	-0008
Stanley Access Technologies LLC		65 Scott Swamp Road Farmington, CT 06032	nington, CT 06032					-	Expires: 01/31/	2015
PAYROLL NO.	FOR WEEK ENDING	PROJECT AND LOCATION:		-		PROJECT OR CONTRACT NO:	ACT NO:			
13	9/5/2015	5 MARY SWITZER BUILDING 330 C STREET SOUTH WEST WASHINGTON DC 20001	STREET SOUTH W	EST WASHINGTON DC	20001	GS-11P-14-MK-C-0010 / SAP# 5000720035	-0010 / SAP# 50	000720035		
(E)	(E)	(4) DAY AND DATE	(6)	2		(B				(6)
ION		SU M T W TH F S				Deductions				į
NAME AND INDIVIDUAL IDENTIFYING O THE NUMBER (e.g., LAST FOUR DIGITS OF OCIVIAL SECTION NIMBERS) OF WORKER O THE	WORK	5 30 31 1 2 3 4 5 TOT HOURS WORKED EACH DAY	TOTAL RATE	GROSS AMOUNT EARNED FI	WITH- HOLDING FICA TAX	G Insurance	401K	Union	TOTAL	WAGES PAID FOR WEEK
-				00 08						
		0 0 0 0 0 0 0	0	\$0.00	6	59		69	49	•
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While completion of Form WH-347 is optional, it is mandatory for covered confractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 24.0 U.S.C. § 3145) contractors benchmarked as and subcontractors performing work on Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls to the Federal agency contracting for or financing agencial processing this information to determine that employees have received legally required wages and fringe benefits or mechanic has been paid to test than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencial receiving this information to determine that employees have received legally required wages and fringe benefits.

Public Burden Statement

We estimate that is will take an average of 55 minutes to complete this collection, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. If you have any comments regarding these estimates or any other aspect of this collection, including suggestions for reducing this burden, send them to the Administrator, Wage and Hour Division, ESA, U.S. Department of Labor, Room S3502, 200 Constitution Avenue, N.W.

Washington, D.C. 20210

Date 9/28/2015

	Erika Lessard Customer Financial Services Supervise	Custome	r Financial Se	ryices Supervisor
	(Name of Signatory Party)	y Party)	(Title)	
0	do hereby state;			
=	(1) That I pay or supervise the payment of the persons employed by	se the payn	ent of the per	sons employed by
Ġ	Stanley Access Technologies LLC	onies II C		

(Contrador or Subcontrador)

MARY SWITZER BUILDING 330 C STREET SOUTH WEST WASHINGTON DC 20001

; that during the payroll period commencing on the

(Building or Work)

30 day of ,
and ending
5 day of ,
all persons employed on said project have been paid the full weekly wages earned, that no rebates have

Sep-15

from the full

been or will be made either directly or Indirectly to or on behalf of said

Stanley Access Technologies LLC

(Contrador or Subcontrador) weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, about that no permissible deductions as defined in Regulations, Part 3 (29 C. F. R. Subtlite A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Start. 109, 72 Stat. 95 Stat. 397, 70 Stat. 397, 70 Stat. 397, 30 S

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for habores or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract, that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprendices employed in the above portiod are duly registered in a bona fide apprendiceship program registered with a State apprendiceship agency recognized by the Bureau of Apprendiceship and Training, United States Department of Labor, of if no such recognized agency exists in a State, are registered with the Bureau of Apprendiceship and Training, United States Department of Labor, (4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS x - in addition to the basic hourly wane rates paid to each laborer or mechanic listed in the above referenced payroil, payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in Section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

u – Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4(c) below.

(c) EXCEPTIONS

EXCEPTION (CRAFT)	EXPLANATION
REMARKS.	Sk.

SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION, SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE

31 OF THE UNITED STATES CODE.

	(b) WHERE FRINGE BENEFITS ARE PAID IN CASH	

30-Sep-15

DATE

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4		-	/	
9	V			

Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4(c) below.			(CRAFT) EXPLANATION									
Each lai as indice basic ho in the co		(c) EXCEPTIONS	EXCEPTION (CRAFT)									
ACCOUNTANT (Title)	mployed by:	ss on the	ontractor):: that during the payroll period commencing on tt		ng the 27 day of SEPTEMBER, 2015,	s full weekly wages earned, that no rebates have behalf of said	from the full	deductions have been made either directly or , other than permissible deductions as defined	the Secretary of Labor under the Copeland Act, 7; 76 Stat. 357; 40 U.S.C. 3145), and described			
(Name of Signatory Party)	to neterby state. (1) That I pay or supervise the payment of the persons employed by:	W.E. BOWERS	(Contractor or Subcontractor) SWITZER HHS	(Building or Work)	21 day of SEPTEMBER , 2015 , and ending the 27	all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said	W.E. BOWERS (Contractor or Subcontractor)	weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined	in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 3145), and described below:			

(2) That any payrolls otherwise under this contract required to be submitted for the above period are applicable wage rates contained in any wage determination incorporated into the contract; that the correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the classifications set forth therein for each laborer or mechanic conform with the work he performed.

REMARKS:

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS (4) That:

will be made to appropriate programs for the benefit of such employees, except as noted in in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed in the contract have been or Section 4(c) below. ×

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE. (0 MELISSA GEORGE - ACCOUNTANT NAME AND TITLE

Job Cost Certified Payroll Bowers & Associates, Inc.

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SMILSER HEALTH & HUMAN SERVICE

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330 C ST NW

:ssanbbA

WASHINGTON, DC 20001

Vaq Name 9/27/2015 For the Week Ending

Code

KEC 00.0 45.89

Rate

Рау

REG 19.45

Thompson, Keith A.

Federal Class Code: PLUM0602-008 5098 / S11 - SE#602 JOURNEYMAN 1

(p) (Q) (2Y5-1 - 2E#602 APP 2 STEP 1

Federal Class Code:

Andalibi, Hossein S. Social Security # / Labor Class

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78.12

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Federal Total Ded.

State/Local Other

26.28

6L.88

11.28

48.23

06.61

60.28

FICA

FICA SS

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155.60

1372.48

343.12

Gross Pay

Job Earned

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00.8

Hours

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L7/6

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97/6

igS

DATE	23-Sep-15		(b) WHERE FRINGE BENEFITS ARE PAID IN CASH	IN CASH
	MELISSA GEORGE (Name of Signatory Party)	ACCOUNTANT (Title)	Each laborer or mechanic listed in the above references indicated on the payroll, an amount not less than basic hourly wage rate plus the amount of the requirement and the payront as protecting the property below.	Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract except and in Carling Man, below
do nereby state: (1) That I pay or	do hereby state: (1) That I pay or supervise the payment of the persons employed by:	lloyed by:	il ule colludot, except as noted i	ii Sectioii 4(c) below.
	W.E. BOWERS	on the	(c) EXCEPTIONS	
	ontractor or Subcontr	actor)	EXCEPTION (CRAFT)	EXPLANATION
	SWITZER HHS (Building or Work)	; that during the payroll period commencing on th		
14 day of	SEPTEMBER , 2015 , and ending the 20 day of	the 20 day of SEPTEMBER, 2015,		
all persons em been or will be	all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said	Il weekly wages earned, that no rebates have nalf of said		
	W.E. BOWERS (Contractor or Subcontractor)	from the full (or)		
weekly wage: indirectly fror	s earned by any person and that no dec n the full wages earned by any person, of	weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined		
in regulations as amended (below:	in Regulations, Part 3 (29 CFR Subdute A), Issued by the Secretary of as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; below:	in Regulations, Part 3 (29 CFR Subulte A), Issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 3145), and described below:		
(2) That a	any payrolls otherwise under this contract req	(2) That any payrolls otherwise under this contract required to be submitted for the above period are		

Download at www.Download-Construction-Forms.com

(b) WHERE FRINGE RENEFITS ARE PAID IN CASH

(c) EXCEPTIONS	
EXCEPTION (CRAFT)	EXPLANATION
-	
REMARKS:	
NAME AND TITLE	NATC
MELISSA GEORGE - ACCOUNTANT	(o) (o)
THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY S CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. 3 101 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.	THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.

correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in

a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

(4) That:

in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in

×

Section 4(c) below.

Bowers & Associates, Inc. Certified Payroll Job Cost

9/24/2015

SMILZER HEALTH & HUMAN SERVICE

12008DC

Job:

MN LS

Idress: 330 C ST NW

WASHINGTON, DC 20001

9/20/2015

For the Week Ending

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Andalibi, Hossein S.	KEC	45.89	00.0	00.0	00.0	5,00	00.0	00.0	00.0	5.00	214.45	LE'901	111.84	120.78	76.291,1
Social Security # / Labor Class	əboƏ	Pate	† I/6	\$1/6	91/6	L1/6	81/6	61/6	07/6	Hours	Gross Pay	FICA	Federal	Total Ded.	Рау
Уате	Pay	Pay	noM	ənŢ	bəW	nqL	'nЯ	1s2	ung	lstoT	Job Earned	FICA SS	State/Local	Отћег	19N

(b) (c) S31 - SF#602 JOURNEYMAN I Federal Class Code: PLUM0602-008

Wage and Hour Division

PAYROLL

(For Contractor's Optional Use; See Instructions at www.dol.gov/whd/forms/wh347instr.htm)

U.S. Wage and Hour Division Rev. Dec. 2008

Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number.

			Persons are not required to respond to the collection of information unless it displays a currently valid UMB control number.	stion or informa	ion uniess it disp	lays a currently	valid OIVIB conti	ol number.			Kev. Dec. 2000	2000
NAME OF CONTRACTOR OR SUBCONTRACTOR	RACTOR			ADDR	ADDRESS 1341 Hughes Ford Road, Suite 101	nes Ford Road	l, Suite 101				OMB No.:	OMB No.: 1235-0008
Wycliffe Ent	terpris	Wycliffe Enterprises, Inc dba Powercomm	mı		Frederick,	Frederick, MD 21701					Expires. u	01/31/2013
PAYROLL NO. 33 NO WORK PERFORMED		FOR WEEK ENDING	G 09/26/2015	SWI	PROJECT AND LOCATION SWITZER HHSC	N.			PROJECT (PROJECT OR CONTRACT NO. GS11P14MKC0010 G	NO. G14.312	
(1)	(2)	(3)	(4) DAY AND DATE	l F	(9)	(2)		<u> </u>	(8)			(6)
NAME AND INDIVIDUAL IDENTIFYING NUMBER (e.g., LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER) OF WORKER	NO. OF WITHHOLDIN EXEMPTIONS	WORK CLASSIFICATION	5 20 21 22 23 24 25 HOURS WORKED EACH DAY	F S 26 TOTAL HOURS	RATE S OF PAY	GROSS AMOUNT EARNED	WITH- HOLDING FICA TAX	STA		OTHER	NET WAGES TOTAL PAID DEDUCTIONS FOR WEEK	NET WAGES PAID FOR WEEK
ARALLIO ANTONIO (b) (6)	0	ELECTRICIAN	Ο 0		\$69.60							
CROMARTIE SHAUN	9	ELEC0026-017 ELECTRICAL	0		\$51.75							
	0	INSTALLER	W		34.50 10.25							
ENYEW, MARKOS	,	ELEC0026-017 ELECTRICAL	0		\$42.08							
	-	INSTALLER	N		28.05 8.99							
GAWTHORP, STERLING	c	ELEC0026-017	0		\$40.58							
	0	INSTALLER	w		27.05 8.85							
HAYMORE, JACOB	ư	ELEC0026-017	0		\$45.00							
)	INSTALLER	Ø		30.00 9.07							s.
PHAM, HUE VAN	(ELEC0026-017	0		\$40.58							
NON-UNION - FRINGES PAID TO HIM	Ν	INSTALLER	w		27.05 8.85							
HAZEPH	-	ELEC0026-017	0		\$40.58							
	~	INSTALLER	w		27.05 8.95							
NGWA, GERALD	٣	TELECOM	0		\$22.32							
	י	YR1	w		14.88 6.08							

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information to determine that employees have received legally required wages and fringe benefits.

Public Burden Statement

We estimate that is will take an average of 55 minutes to complete this collection, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. If you have any comments regarding these estimates or any other aspect of this collection, including suggestions for reducing this burden, send them to the Administrator, Wage and Hour Division, U.S. Department of Labor, Room S3502, 200 Constitution Avenue, N.W.

ccountant — Each laborer or mechanic listed in the above referenced payroll has been paid,	(Title) as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in section 4(c) below.	(c) EXCEPTIONS	/EKCOMM on the EXCEPTION (CRAFT) EXPLANATION		September 2015	earned, that no rebates have	ERCOMM from the full		ade either directly or indirec tly as defined in Regulations, Part	d Act, as amended (48 Stat. 948, elow.		REMARKS:	nitted for the above period are at the second secon
Accountant	(Title)	of the persons employed by	Wycime Enterprises, inc dba Poweboomrowercomm (Contractor or Subcontractor)	· HHSC that during the payroll period commencing on the	2015, and ending the 26th day of September	all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said	Wycliffe Enterprises, Inc dba Powerฐคูติเกติงพะกะ	(Contractor or Subcontractor)	weekly wages earned by any person and that no deduc tions have been m ade either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part	ary of Labor under the Copeland Act, as amended (J.S.C. § 3145), and described below:			(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the
I,	(Name of Signatory Party) do hereby state:	(1) That I pay or supervise the payment of the persons employed by	Wycime Enterpri (Contractor	Grunley Construction- Mary Switzer HHSC	(Building or Work) 20th _{day of} September 2015	all persons employed on said project have been paid the full weekly been or will be made either directly or indirectly to or on behalf of said	Wycliffe Enterprise	(Contractor	weekly wages earned by any person and the full wages earned by any person of	3 (29 C.F. R. Subtitle A), issued by the Secretary of Labor under the Copeland Act, 63 Start. 108, 72 Stat. 967, 76 Stat. 357; 40 U.S.C. § 3145), and described below:			(2) That any payrolls otherwise under this contract required to be s ubmitted correct and complete; that the wage rates for laborers or mechanics contained the

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

9/29/2015

Date

Diana Richardson NAME AND TITLE Accountant

(3) T hat any apprent ices em ployed in t he abov e period are duly registered in a bona fide apprenticeship program regis tered w ith a St ate apprent iceship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

THE WILLFUL FALSIFICATION O FANY O FT HE ABO VE ST ATEMENTS M AY SUBJ ECTT HE CO NTRACTOR O R SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION, SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.

in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe bene fits as listed in the contract have been or will be made to appropria te progra ms for the bene fit of such

employees, except as noted in section 4(c) below.

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

 \nearrow

(4) That:

Wage and Hour Division

PAYROLL

(For Contractor's Optional Use; See Instructions at www.dol.gov/whd/forms/wh347instr.htm)

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U.S. Wage and Hour Division Rev. Dec. 2008

OMB No.: 1235-0008 Expires: 01/31/2015 NET WAGES PAID FOR WEEK 6) TOTAL DEDUCTIONS GS11P14MKC0010 G14.312 PROJECT OR CONTRACT NO. OTHER (8) DEDUCTIONS STATE WITH-HOLDING TAX ADDRESS 1341 Hughes Ford Road, Suite 101 FICA Frederick, MD 21701 GROSS AMOUNT EARNED 0 PROJECT AND LOCATION SWITZER HHSC 46.40 15.65 8.85 8.85 10.25 8.99 9.07 869.60 \$51.75 \$42.08 \$40.58 \$45.00 \$40.58 \$40.58 RATE OF PAY 9 30.00 34.50 28.05 27.05 27.05 TOTAL (2) 19 S 18 Į, (4) DAY AND DATE 17 16 3 15 -09/19/2015 7 Σ 13 S .T2 A0 .T0 0 0 0 0 Ø 0 Ŋ 0 S 0 Wycliffe Enterprises, Inc dba Powercomm FOR WEEK ENDING ELEC0026-017 ELECTRICAL ELEC0026-017 ELECTRICAL ELEC0026-017 ELECTRICAL ELEC0026-017 ELECTRICAL ELEC0026-016 ELEC0026-017 ELECTRICAL ELECTRICIAN ELEC0026-017 WORK CLASSIFICATION ELECTRICAL INSTALLER INSTALLER INSTALLER INSTALLER (3) NO. OF WITHHOLDING EXEMPTIONS OR SUBCONTRACTOR 9 0 2 7 NO WORK PERFORMED FRINGES PAID TO HIM **NON-UNION - FRINGES PAID TO HIM** NAME AND INDIVIDUAL IDENTIFYING NUMBER (e.g., LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER) OF WORKER SAWTHORP, STERLING NAME OF CONTRACTOR CROMARTIE. SHAUN ARAUJO, ANTONIO HAYMORE JACOB ENYEW, MARKOS PHAM, HUE VAN 32 PAYROLL NO. 9 9 O

29 C.F.R. § 5.6(a)3(iii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at

8.95

27.05

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INSTALLER

TELECOM APPRENTICE YR 1

3

\$22.32

80.9

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Public Burden Statement

We estimate that is will take an average of 55 minutes to complete this collection, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection, including suggestions for reducing this burden, send them to the Administrator, Wage and Hour Division, U.S. Department of Labor, Room S3502, 200 Constitution Avenue, N.W. Washington, D.C. 20210

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

9/23/2015

Date_

THE WILLFUL FALSIFICATION O F ANY O FT HEABO VEST ATEMENTS M AY SUBJECT THE CONTRACTOR O R SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF THE 31 OF THE UNITED STATES CODE.

NAME AND TITLE Diana Richardson

(3) T hat any apprent ices em ployed in t he abov e period are duly registered in a bona fide apprenticeship program regis tered w ith a St ate apprent iceship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

Accountant

in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe bene fits as listed in the contract have been or will be made to appropria te progra ms for the bene fit of such employees, except as noted in section 4(c) below.

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(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS